# National Library of Medicine - Medical Subject Headings

#### **2002 MeSH**

## **MeSH Descriptor Data**

#### Return to Entry Page

MeSH Heading	Glucosylceramidase
Tree Number	D08.586.277.450.420.475.400
Annotation	/ <u>defic</u> : consider also <u>GAUCHER DISEASE</u>
Scope Note	A glycosidase that hydrolyzes a glucosylceramide to yield free ceramide plus glucose. Deficiency of this enzyme leads to abnormally high concentrations of glucosylceramide in the brain in GAUCHER DISEASE. EC 3.2.1.45.
Entry Term	Glucocerebrosidase
Entry Term	Acid beta-Glucosidase
Entry Term	Glucocerebroside beta-Glucosidase
Entry Term	Glucosyl Ceramidase
Entry Term	Glucosylceramide beta-Glucosidase
Entry Term	Glucosylsphingosine Glucosyl Hydrolase
Entry Term	beta-Glucocerebrosidase
See Also	Gaucher Disease
Allowable Qualifiers	AD AE AI AN BI BL CF CH CL CS CT DE DF DU EC GE HI IM IP ME PD PH PK PO RE SD SE ST TO TU UL UR
CAS Type 1 Name	D-Glucosyl-N-acylsphingosine glucosylhydrolase
Registry Number	EC 3.2.1.45
Previous Indexing	Cerebrosides (1970-1974)
Previous Indexing	Glucose (1970-1974)
Previous Indexing	Glycoside Hydrolases (1970-1974)
History Note	91(75); was see under GLUCOSIDASES 1975-90
Unique ID	D005962

### **MeSH Tree Structures**

Enzymes, Coenzymes, and Enzyme Inhibitors [D08]

Enzymes [D08.586]

Hydrolases [D08.586.277]

Glycoside Hydrolases [D08.586.277.450]

Glucosidases [D08.586.277.450.420]

Glycosylceramidase [D08.586.277.450.420.475]

► Glucosylceramidase [D08.586.277.450.420.475.400]

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# **National Library of Medicine - Medical Subject Headings**

### **2002 MeSH**

# **MeSH Descriptor Data**

### Return to Entry Page

MeSH Heading	1-Deoxynojirimycin
Tree Number	D03.383.621.180
Scope Note	An alpha-glucosidase inhibitor with antiviral action. Derivatives of deoxynojirimycin may have anti-HIV activity.
Entry Term	1,5-Deoxy-1,5-imino-D-mannitol
Entry Term	1-Deoxymannojirimycin
Entry Term	1,5-Dideoxy-1,5-imino-D-mannitol
Entry Term	1-Deoxynojirimycin Hydrochloride
Entry Term	Bay n 5595
Entry Term	Moranoline
Allowable Qualifiers	AA AD AE AG AI AN BL CF CH CL CS CT DU EC HI IM IP ME PD PK PO RE SD ST TO TU UR
Entry Version	DEOXYNOJIRIMYCIN
Pharm. Action	Antiviral Agents
Pharm. Action	Enzyme Inhibitors
CAS Type 1 Name	3,4,5-Piperidinetriol, 2-(hydroxymethyl)-, (2R-(2alpha,3beta,4alpha,5beta))-
Registry Number	19130-96-2
Related Number	73285-50-4 (HCl)
<b>1</b>	84444-90-6 (1,5-dideoxy-1,5-imino-D-mannitol)
Previous Indexing	Glucosamine/analogs & derivatives (1981-1992)
Online Note	use 1-DEOXYNOJIRIMYCIN (NM) to search 1,5-DIDEOXY-1,5-IMINO-D-MANNITOL 1984-92 & DEOXYNOJIRIMYCIN 1981-92
History Note	93; was DEOXYNOJIRIMYCIN (NM) 1981-92; 1,5-DIDEOXY-1,5-IMINO-D-MANNITOL was NM 1984-92
Unique ID	D017485

## **MeSH Tree Structures**

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4.			

=> fil reg; d ide 110 FILE 'REGISTRY' ENTERED AT 12:48:48 ON 15 OCT 2002 USE IS SUBJECT TO THE TERMS OF YOUR STN CUSTOMER AGREEMENT. PLEASE SEE "HELP USAGETERMS" FOR DETAILS. COPYRIGHT (C) 2002 American Chemical Society (ACS)

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L10 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2002 ACS 37228-64-1 REGISTRY RN Ceramidase, glucosyl- (9CI) (CA INDEX NAME) CNOTHER NAMES: .beta.-D-Glucocerebrosidase CN .beta.-Glucocerebrosidase CN.beta.-Glucosylceramidase CNCNAcid .beta.-glucosidase CNCeramide glucosidase CNCerebroside .beta.-glucosidase E.C. 3.2.1.45 CN Glucocerebrosidase CN Glucocerebroside .beta.-glucosidase CN CN Glucose cerebrosidase CN Glucosylceramidase CN Glucosylceramide .beta.-glucosidase CN Glucosylcerebrosidase Glucosylsphingosine .beta.-D-glucosidase CN Glucosylsphingosine .beta.-glucosidase CN MF Unspecified

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\*\*\* STRUCTURE DIAGRAM IS NOT AVAILABLE \*\*\*

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698 REFERENCES IN FILE CA (1962 TO DATE)

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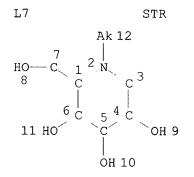
STRUCTURE FILE UPDATES: 14 OCT 2002 HIGHEST RN 461382-59-2 DICTIONARY FILE UPDATES: 14 OCT 2002 HIGHEST RN 461382-59-2

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NODE ATTRIBUTES:
CONNECT IS E1 RC AT 12
DEFAULT MLEVEL IS ATOM
DEFAULT ECLEVEL IS LIMITED

GRAPH ATTRIBUTES: RING(S) ARE ISOLATED OR EMBEDDED NUMBER OF NODES IS 12

STEREO ATTRIBUTES: NONE L9 152 SEA FILE=REGISTRY SSS FUL L7

100.0% PROCESSED 8308 ITERATIONS SEARCH TIME: 00.00.03

152 ANSWERS

full file search
done on this structure
(N-alkyl derivs of deoxynojirimycin)

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=> fil medl

FILE 'MEDLINE' ENTERED AT 13:35:02 ON 15 OCT 2002

FILE LAST UPDATED: 12 OCT 2002 (20021012/UP). FILE COVERS 1958 TO DATE.

On June 9, 2002, MEDLINE was reloaded. See HELP RLOAD for details.

MEDLINE thesauri in the /CN, /CT, and /MN fields incorporate the MeSH 2002 vocabulary. Enter HELP THESAURUS for details.

THIS FILE CONTAINS CAS REGISTRY NUMBERS FOR EASY AND ACCURATE SUBSTANCE IDENTIFICATION.

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L7 STR

L9 152 SEA FILE=REGISTRY SSS FUL L7

L11 408 SEA FILE=MEDLINE ABB=ON 1-DEOXYNOJIRIMYCIN/CT

L15 101 SEA FILE=MEDLINE ABB=ON L9

L16 16 SEA FILE=MEDLINE ABB=ON L15 NOT L11

L17 15 SEA FILE=MEDLINE ABB=ON L16 AND (PD OR TU)/CT

Subheadenajo PD- pharmacology The therapeutic use

=> d ibib ab 117 1-15

L17 ANSWER 1 OF 15 MEDLINE

ACCESSION NUMBER: 92359929 MEDLINE

DOCUMENT NUMBER: 92359929 PubMed ID: 1497606

TITLE: Activation of lipoprotein lipase in cardiac myocytes by

glycosylation requires trimming of glucose residues in the

endoplasmic reticulum.

AUTHOR: Carroll R; Ben-Zeev O; Doolittle M H; Severson D L

CORPORATE SOURCE: MRC Signal Transduction Group, Faculty of Medicine,

University of Calgary, Alberta, Canada.

CONTRACT NUMBER: HL-21006 (NHLBI)

HL-28481 (NHLBI)

SOURCE: BIOCHEMICAL JOURNAL, (1992 Aug 1) 285 ( Pt 3) 693-6.

Journal code: 2984726R. ISSN: 0264-6021.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199209

ENTRY DATE: Entered STN: 19920925

Last Updated on STN: 19970203 Entered Medline: 19920910

AB Incubation of cycloheximide-treated cardiac myocytes results in a time-dependent increase in cellular and heparin-releasable lipoprotein lipase (LPL) activities. N-Methyldeoxynojirimycin (1 mM) and castanospermine (100 micrograms/ml), inhibitors of glucosidases in the endoplasmic reticulum (ER), prevented the increase in cellular LPL activity. The glucosidase inhibitors did not influence the synthesis or turnover of LPL protein. Therefore activation of LPL by glycosylation in cardiac myocytes requires the trimming of glucose residues in oligosaccharide chains by glucosidases of the ER.

L17 ANSWER 2 OF 15 MEDLINE

ACCESSION NUMBER: 92303625 MEDLINE

DOCUMENT NUMBER: 92303625 PubMed ID: 1609840

TITLE: Evidence for processing of dolichol-linked oligosaccharides

in patients with neuronal ceroid-lipofuscinosis.

AUTHOR: Daniel P F; Sauls D L; Boustany R M

CORPORATE SOURCE: Department of Biochemistry, E. K. Shriver Center, Waltham,

MA 02254.

CONTRACT NUMBER: NS 24279 (NINDS)

SOURCE: AMERICAN JOURNAL OF MEDICAL GENETICS, (1992 Feb 15) 42 (4)

586-92.

Journal code: 7708900. ISSN: 0148-7299.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199207

ENTRY DATE: Entered STN: 19920731

Last Updated on STN: 19920731 Entered Medline: 19920722

AΒ In agreement with reports from other laboratories, we have shown that patients with the juvenile or late infantile forms of neuronal ceroid-lipofuscinosis (NCL) have greatly increased levels (5-fold to 20-fold) of dolichyl pyrophosphoryl oligosaccharides in their cerebral gray matter. Oligosaccharides containing 2 GlcNAc residues and 3 to 9 mannose residues were liberated by mild acid hydrolysis. The oligosaccharide profile given by brain tissue  $\bar{f}$ rom  $\bar{2}$  patients with infantile NCL was markedly different from that of late infantile and juvenile NCL brain, with Man9GlcNAc2 as the most abundant component and decreasing amounts of Man8- Man7- and Man6GlcNAc2. By contrast, Man5GlcNAc2 was the most abundant oligosaccharide present in all juvenile NCL brain samples analyzed. Both the susceptibility of the isolated Man5GlcNAc2 to endoglucosaminidase H digestion and permethylation analysis clearly indicated that it is not an intermediate in the biosynthesis of Glc3Man9GlcNAc2-PP-dolichol but has undergone catabolism, probably either in the endoplasmic reticulum or in the Golqi apparatus. Treatment of cultured skin fibroblasts for 7 days with N-methyldeoxynojirimycin, a potent inhibitor of the endoplasmic reticulum processing enzymes glucosidase I and II, resulted in an accumulation of the same Man5GlcNAc2-PP-dolichol species that was elevated in juvenile NCL brain. The level in untreated fibroblasts was undetectable, suggesting that inhibition of processing glucosidases has interfered with the regulation and compartmentalization of lipid-linked oligosaccharides.

L17 ANSWER 3 OF 15 MEDLINE

ACCESSION NUMBER: 91371598 MEDLINE

DOCUMENT NUMBER: 91371598 PubMed ID: 1893562

TITLE: Expression of choline acetyltransferase activity in a co-culture of spinal cord and skeletal muscle cells is

inhibited by myogenic differentiation inhibitors.

AUTHOR: Kengaku M; Kawashima S; Nakane M

CORPORATE SOURCE: Department of Molecular Neurobiology, Tokyo Metropolitan

Institute for Neurosciences, Japan.

SOURCE: BRAIN RESEARCH. DEVELOPMENTAL BRAIN RESEARCH, (1991 Jun 21)

60 (2) 133-6.

Journal code: 8908639. ISSN: 0165-3806.

PUB. COUNTRY: Netherlands

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199110

ENTRY DATE: Entered STN: 19911108

Last Updated on STN: 19980206 Entered Medline: 19911021

AB The effect of myogenic differentiation on the expression of choline acetyltransferase (ChAT) activity in co-cultured spinal cord neurons was studied. ChAT activity in spinal cord cells dissociated from 14-day mouse embryos was markedly increased when co-cultured with skeletal myotubes from 20-day embryos. This enhancement of ChAT activity was not observed in

the presence of concanavalin A (ConA) or N-methyl-1-deoxynojirimycin (MDJN) which inhibits myoblast fusion, creatine phosphokinase and acetylcholinesterase activities in muscle cells. ChAT activity in spinal cord neurons cultured alone was unaffected by these agents. The inhibitory effect of ConA and MDJN was reversible, with an almost full recovery of ChAT activity following removal of the agents. Addition of ConA or MDJN after myotube formation exerted little inhibitory effect on ChAT activity. The effects of ConA and MDJN on ChAT activity in co-cultures were comparable to those on creatine phosphokinase and acetylcholinesterase. These observations indicate that the neurotrophic effects of skeletal muscle cells on spinal cord neurons are dependent on the differentiation state of the muscle cells.

L17 ANSWER 4 OF 15 MEDLINE

ACCESSION NUMBER: 91312437 MEDLINE

DOCUMENT NUMBER: 91312437 PubMed ID: 1857411

TITLE: Anti-HIV drug mechanism.

AUTHOR: Jones I M; Jacob G S

SOURCE: NATURE, (1991 Jul 18) 352 (6332) 198.

Journal code: 0410462. ISSN: 0028-0836.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: Letter LANGUAGE: English

FILE SEGMENT: Priority Journals; AIDS

ENTRY MONTH: 199108

ENTRY DATE: Entered STN: 19910913

Last Updated on STN: 19970203 Entered Medline: 19910828

L17 ANSWER 5 OF 15 MEDLINE

ACCESSION NUMBER: 91134980 MEDLINE

DOCUMENT NUMBER: 91134980 PubMed ID: 1704656

TITLE: Inhibition of HIV and SIV infectivity by blockade of

alpha-glucosidase activity.

AUTHOR: Ratner L; vander Heyden N; Dedera D

CORPORATE SOURCE: Department of Medicine, Washington University, St. Louis,

Missouri 63110.

CONTRACT NUMBER: AI24745 (NIAID)

AI25903 (NIAID) AI27302 (NIAID)

SOURCE: VIROLOGY, (1991 Mar) 181 (1) 180-92.

Journal code: 0110674. ISSN: 0042-6822.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals; AIDS

ENTRY MONTH: 199103

ENTRY DATE: Entered STN: 19910405

Last Updated on STN: 19970203 Entered Medline: 19910315

Processing of HIV and SIV envelope oligosaccharides is critical for proper intracellular trafficking and function. An inhibitor of alpha-glucosidases I and II, N-butyl deoxynojirimycin (N-BuDNJ), retards HIV-1 and SIVmac spread in lymphocytes and monocytes by diminishing virus infectivity, and also causes a reduction in syncytia formation between infected cells and uninfected lymphocytes. N-BuDNJ retards envelope processing from the precursor form to the mature surface (SU) and transmembrane proteins in HIV-1- and SIVmac-infected cells, as well as in cells infected with vaccinia-HIV-1 envelope recombinant virus. However, no significant reduction is seen in the amount of SU in released virus particles, though the virus particle-associated SU from N-BuDNJ-treated cells has an altered electrophoretic mobility. In contrast, N-BuDNJ had no effect on GAG protein synthesis and processing. These findings demonstrate a critical

requirement for oligosaccharide processing by alpha-glucosidases I and II for HIV-1 and SIVmac envelope processing and fusogenicity.

L17 ANSWER 6 OF 15 MEDLINE

ACCESSION NUMBER: 90359716 MEDLINE

DOCUMENT NUMBER: 90359716 PubMed ID: 2561901 TITLE:

Several new AIDS drugs being tested. AUTHOR: Anonymous

SOURCE: ONCOLOGY, (1989 Jun) 3 (6) 114, 120.

Journal code: 8712059. ISSN: 0890-9091.

PUB. COUNTRY: United States DOCUMENT TYPE: News Announcement

LANGUAGE: English

FILE SEGMENT: Priority Journals; AIDS

ENTRY MONTH: 199010

ENTRY DATE: Entered STN: 19901109

Last Updated on STN: 19980206 Entered Medline: 19901004

ANSWER 7 OF 15 MEDLINE

ACCESSION NUMBER: 90303970 MEDLINE

DOCUMENT NUMBER: 90303970 PubMed ID: 2364019

TITLE:

Attenuation of HIV-1 infectivity by an inhibitor of

oligosaccharide processing.

AUTHOR: Dedera D; Vander Heyden N; Ratner L

CORPORATE SOURCE: Department of Medicine, Washington University, St. Louis,

Missouri 63110.

SOURCE: AIDS RESEARCH AND HUMAN RETROVIRUSES, (1990 Jun) 6 (6)

785-94.

Journal code: 8709376. ISSN: 0889-2229.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals; AIDS

ENTRY MONTH: 199008

ENTRY DATE: Entered STN: 19900921

> Last Updated on STN: 19970203 Entered Medline: 19900813

AB A series of inhibitors of trimming glucosidases and mannosidases were examined for antiviral activity toward HIV-1. N-butyl deoxynojirimycin (N-buDNJ) was found to be the most potent agent studied. Treatment of acutely infected lymphoid cells with 2.0 mM N-buDNJ reduced virus yield more than 90%, without affecting cell growth. Though lower concentrations of N-buDNJ (0.002-0.2 mM) did not affect HIV-1 production, there was complete inhibition of syncytia formation. Treatment of chronically infected lymphoid cells with 0.1-1.0 mM N-buDNJ resulted in no significant change in virus production, but 80% reduction of infectivity. The attenuation in HIV-1 infectivity was due at least partially to diminished binding to CD4+ lymphoid cells. Chronically infected lymphoid cells treated with 0.02-1.0 mM N-buDNJ for at least 3 days were markedly impaired in their ability to form syncytia with uninfected lymphoid cells. N-buDNJ treatment of HIV-1 infected cells resulted in both a reduction in the cell surface envelope proteins, and an increase in their apparent molecular weight. These results show that N-buDNJ can be used to impair the infectivity of HIV-1 without significant toxicity.

L17 ANSWER 8 OF 15 MEDLINE

ACCESSION NUMBER: 90266453 MEDLINE

DOCUMENT NUMBER: 90266453 PubMed ID: 1693245

TITLE: The significance of carbohydrate trimming for the

antigenicity of the Semliki Forest virus glycoprotein E2.

AUTHOR: Kaluza G; Repges S; McDowell W

CORPORATE SOURCE: Institut fur Virologie, Justus Leibig Universitat Giessen, Federal Republic of Germany.

SOURCE: VIROLOGY, (1990 Jun) 176 (2) 369-78.

Journal code: 0110674. ISSN: 0042-6822.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199007

ENTRY DATE: Entered STN: 19900810

Last Updated on STN: 19990129 Entered Medline: 19900705

AΒ Six groups, designated a-f, of noncompeting murine monoclonal antibodies to the envelope glycoprotein E2 of Semliki Forest virus (SFV) have been used to analyze antigenic changes caused by differences in the carbohydrate chain composition of the envelope glycoprotein E2 in the virion. Deletion of terminal sialic acids as observed in virus progeny from mosquito cells did not affect antigenic properties. Inhibition of the trimming pathway in infected chicken cells by the mannosidase I inhibitor dMM led to infectious virus particles containing mannose-rich oligosaccharides of the composition Man9(GlcNAc)2 in the envelope glycoproteins. This alteration had no effect on antigenicity. If inhibition was, however, performed with MdN which acts on alpha-glucosidase giving rise to virions with glycoproteins containing three additional glucose residues in the carbohydrate chains [Glc3Man7, 8, 9(GlcNAc)2], significant antigenic changes were observed. The six epitopes were differently affected by the underlying structural change and the pattern of exposition of epitopes was not identical with that observed after cleavage of intramolecular disulfide bonds. Concomitantly, the cleavage rate of gp62, the intracellular precursor molecule of the glycoproteins E2 and E3 of the virus particle, was reduced causing a reduction of virus yield. It is concluded that the existence of untrimmed carbohydrate chains is sufficient to allow SFV maturation. The trimming reactions improve this process in a matter suggesting that the carbohydrate chains influence intracellular traffic (addressing) of the respective glycoprotein.

L17 ANSWER 9 OF 15 MEDLINE

ACCESSION NUMBER: 89270116 MEDLINE

DOCUMENT NUMBER: 89270116 PubMed ID: 2729046

TITLE: Experimental treatments for HIV-infected patients.

AUTHOR: Anonymous

SOURCE: AMERICAN FAMILY PHYSICIAN, (1989 Jun) 39 (6) 330.

Journal code: 1272646. ISSN: 0002-838X.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals; AIDS

ENTRY MONTH: 198907

ENTRY DATE: Entered STN: 19900309

Last Updated on STN: 19970203 Entered Medline: 19890707

L17 ANSWER 10 OF 15 MEDLINE

ACCESSION NUMBER: 88013890 MEDLINE

DOCUMENT NUMBER: 88013890 PubMed ID: 3116410

TITLE: Effect of trimming inhibitors on the secretion and

biological activity of a murine IgE monoclonal antibody.

AUTHOR: Granato D A; Neeser J R

CORPORATE SOURCE: Nestec Ltd., Nestle Research Centre, Lausanne, Switzerland.

SOURCE: MOLECULAR IMMUNOLOGY, (1987 Aug) 24 (8) 849-55.

Journal code: 7905289. ISSN: 0161-5890.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

Cook 10/031767 Page 8

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198711

ENTRY DATE: Entered STN: 19900305

Last Updated on STN: 19900305 Entered Medline: 19871109

AB Since secretion of IgE antibodies is known to be blocked by tunicamycin, the first aim of the present study was to determine at which step of glycosylation or processing secretion was restored. For this purpose, murine hybridoma cells secreting an anti beta-lactoglobulin IgE were incubated either in the presence of inhibitors of glucosidase I (castanospermine or N-methyl-1-deoxynojirimycin), or of an inhibitor of Golgi mannosidase II (swainsonine). Terminal galactoses predominate on the native IgE N-linked carbohydrate chains. The action of the trimming inhibitors, which results in changes in these terminal galactose residues, was monitored through detecting binding modifications to Concanavalin A and to the lectin of Ricinus communis. The antibody activity was also evaluated by a radioimmunoassay. It was shown that neither secretion nor anti beta-lactoglobulin activity of the IgE antibody are modified in the presence of any of the trimming inhibitors, whereas secretion is blocked in the presence of tunicamycin. Other biological activities of this IgE were investigated: no difference was observed in the binding of the carbohydrate-modified IgE molecules to normal mouse mast cells, nor to RBL-1 cells, as demonstrated by passive cutaneous anaphylaxis and in vitro binding tests respectively. However, traces of unglycosylated epsilon chain (mol. wt 61,000) found in tunicamycin treated cell supernatant did not bind to RBL-1 cell Fc epsilon receptors. These findings globally suggest that secretion occurs only if the tetradecasaccharide precursor of N-linked carbohydrate chains is transferred from its lipid-carrier to the polypeptide. Further, the presence of such non-processed oligosaccharides (Glc3Man9GlcNAc2) on IgE, does not seem to modify any of the biological activities of this molecule.

L17 ANSWER 11 OF 15 MEDLINE

ACCESSION NUMBER: 87057249 MEDLINE

DOCUMENT NUMBER: 87057249 PubMed ID: 3782099

TITLE: Transfer of nonglucosylated oligosaccharide from lipid to

protein in a mammalian cell.

AUTHOR: Romero P A; Herscovics A

SOURCE: JOURNAL OF BIOLOGICAL CHEMISTRY, (1986 Dec 5) 261 (34)

15936-40.

Journal code: 2985121R. ISSN: 0021-9258.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198701

ENTRY DATE: Entered STN: 19900302

Last Updated on STN: 19900302 Entered Medline: 19870107

AB We have previously shown that the glucosidase inhibitor, N-methyl-1-deoxynojirimycin (MedJN), only partially inhibited N-linked complex oligosaccharide biosynthesis in F9 teratocarcinoma cells whereas the alpha-mannosidase I inhibitor, manno-1-deoxynojirimycin, completely prevented this synthesis (Romero, P. A. and Herscovics, A. (1986) Carbohydr. Res. 151, 21-28). In order to determine whether a pathway independent of processing glucosidases can occur, F9 cells were pulse-labeled for 2 min with D-[2-3H]mannose in the presence or absence of 2 mM MedJN. In control cells, Man7GlcNAc was identified in the protein-bound oligosaccharides released with endo-beta-N-acetylglucosaminidase H, in addition to the expected Glc1-3Man9GlcNAc and Man9GlcNAc arising from processing of Glc3Man9GlcNAc. MedJN completely prevented the removal of glucose residues from Glc3Man9GlcNAc, but did not

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greatly affect the appearance of Man7GlcNAc associated with protein. Labeled Man7GlcNAc was also found in the lipid-linked oligosaccharides of both control and treated cells. The 2-min pulse-labeled Man7GlcNAc obtained from both the lipid and protein fractions were shown to have identical structures by concanavalin A-Sepharose chromatography and by acetolysis and were clearly different from the Man7GlcNAc obtained from the usual processing pathway. These results demonstrate that transfer of a nonglucosylated oligosaccharide (Man7GlcNAc2) from dolichyl pyrophosphate to protein occurs in F9 cells.

L17 ANSWER 12 OF 15 MEDLINE

ACCESSION NUMBER: 86310826 MEDLINE

DOCUMENT NUMBER: 86310826 PubMed ID: 3018522

TITLE: Transformation by the v-fms oncogene product: role of

glycosylational processing and cell surface expression.

AUTHOR: Nichols E J; Manger R; Hakomori S; Herscovics A;

NICHOIS E O, Manger K, Makomorr S, Merseovies

Rohrschneider L R

CONTRACT NUMBER: CA20551 (NCI)

CA28151 (NCI)

SOURCE: MOLECULAR AND CELLULAR BIOLOGY, (1985 Dec) 5 (12) 3467-75.

Journal code: 8109087. ISSN: 0270-7306.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198610

ENTRY DATE: Entered STN: 19900321

Last Updated on STN: 19970203 Entered Medline: 19861003

The effect of glycosylational-processing inhibitors on the synthesis, cell AB surface expression, endocytosis, and transforming function of the v-fms oncogene protein (gp140fms) was examined in McDonough feline sarcoma virus-transformed Fischer rat embryo (SM-FRE) cells. Swainsonine (SW), a mannosidase II inhibitor, blocked complete processing, but an abnormal v-fms protein containing hybrid carbohydrate structures was expressed on the cell surface. SW-treated SM-FRE cells retained the transformed phenotype. In contrast, two glucosidase I inhibitors (castanospermine [CA] and N-methyl-1-deoxynojirimycin [MdN]) blocked carbohydrate remodeling at an early stage within the endoplasmic reticulum and prevented cell surface expression of v-fms proteins. CA-treated SM-FRE cells reverted to the normal phenotype. Neither SW, CA, nor MdN affected either endocytosis or the tyrosine kinase activity associated with the v-fms gene product in vitro. These results demonstrate the necessity of carbohydrate processing for cell surface expression of the v-fms gene product and illustrate the unique ability to modulate the transformed state of SM-FRE cells with the glycosylational-processing inhibitors CA and MdN.

L17 ANSWER 13 OF 15 MEDLINE

ACCESSION NUMBER: 84123045 MEDLINE

DOCUMENT NUMBER: 84123045 PubMed ID: 6320537

TITLE: Processing of gPr92env, the precursor to the glycoproteins

of Rous sarcoma virus: use of inhibitors of oligosaccharide

trimming and glycoprotein transport.

AUTHOR: Bosch J V; Schwarz R T

SOURCE: VIROLOGY, (1984 Jan 15) 132 (1) 95-109. Journal code: 0110674. ISSN: 0042-6822.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198403

ENTRY DATE: Entered STN: 19900319

Last Updated on STN: 19970203

Entered Medline: 19840322

AB A number of aspects of the processing of gPr92env, the precursor to the viral glycoproteins gp85 and gp35 of Rous sarcoma virus (RSV), have been studied. First, the kinetics of gPr92env processing have been examined, revealing that the precursor is overproduced in the infected cell and only a small percentage (less than 5%) is converted into mature glycoprotein in virus particles. Second, the effects of inhibitors of intracellular transport (monensin) and oligosaccharide trimming (N-methyl-1deoxynojirimycin (MdN) and bromoconduritol (BC) ) on the processing of qPr92env have been examined. It could be shown with all three inhibitors that proteolytic cleavage of gPr92env could occur although oligosaccharide trimming was inhibited. The aberrant cleavage products, gp75mon and gp30mon, produced in the presence of monensin, carry oligosaccharides where only 1-3 mannose residues have been removed in comparison to the precursor gPr92env (this latter carries predominantly Man9(GlcNAc)2). Virus particles containing the aberrant glycoproteins were released in virtually normal amounts and were infectious. In the presence of MdN and BC, viral glycoprotein precursors carrying three (MdN) or one (BC) glucose on the high-mannose oligosaccharide could be detected intracellularly. The aberrant precursors could be proteolytically cleaved to gp80MdN and gp75BC which are equivalent to gp85 but carry the smaller glucose-containing high-mannose oligosaccharides instead of the large, complex, sialidated oligosaccharides of mature glycoprotein. In the presence of MdN, the abnormal glycoproteins were incorporated into virions which were fully infectious.

L17 ANSWER 14 OF 15 MEDLINE

ACCESSION NUMBER: 84123036 MEDLINE

DOCUMENT NUMBER: 84123036 PubMed ID: 6695499

TITLE: Effect of inhibitors of glycosylation on proteolytic

activation of avian influenza virus hemagglutinins:

discrimination between tryptic cleavage and elimination of

the connecting peptide.

AUTHOR: Bosch F X; Orlich M; Legler G; Schwarz R T; Rott R

SOURCE: VIROLOGY, (1984 Jan 15) 132 (1) 199-204.

Journal code: 0110674. ISSN: 0042-6822.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198403

ENTRY DATE: Entered STN: 19900319

Last Updated on STN: 19970203

Entered Medline: 19840322

The glycosylation inhibitors tunicamycin (TM), 2-deoxyglucose (2-dg), bromoconduritol (BC; 3,5/4,6-6-bromo 3,4,5-trihydroxycyclohex-1-ene), and N-methyl-deoxynojirimycin (MdN) have been used to study the role of glycosylation in the two proteolytic reactions involved in the biological activation of H7 influenza virus hemagglutinins (HAs): trypsinlike cleavage and subsequent elimination of the connecting peptide. The results obtained revealed that trypsin-like cleavage of the HAs of pathogenic strains does not require glycosylation, since these HAs were efficiently cleaved in the presence of TM and 2-dg. The elimination of the connecting peptide between HA1 and HA2, however, appears to require the transfer of oligosaccharides onto the HA polypeptide, since this activity was blocked by TM and by 2-dg. Elimination was not blocked by BC or MdN, which inhibit glucose trimming and subsequent conversion of the high-mannose type to the complex type of carbohydrate.

L17 ANSWER 15 OF 15 MEDLINE

ACCESSION NUMBER: 84046704 MEDLINE

DOCUMENT NUMBER: 84046704 PubMed ID: 6636538

TITLE: N-methyl-1-deoxynojirimycin, a novel inhibitor of

glycoprotein processing, and its effect on fowl plague

virus maturation.

AUTHOR: Romero P A; Datema R; Schwarz R T

SOURCE: VIROLOGY, (1983 Oct 15) 130 (1) 238-42.

Journal code: 0110674. ISSN: 0042-6822.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198312

ENTRY DATE: Entered STN: 19900319

Last Updated on STN: 19970203 Entered Medline: 19831217

The glucose analogue N-methyl-1-deoxynojirimycin was found to be a specific inhibitor of the trimming of the outermost glucose residue of the N-linked precursor-oligosaccharide Glc3Man9GlcNAc2, and therefore of oligosaccharide processing, in fowl plague virus-infected chicken-embryo cells. The fowl plague virus glycoproteins in N-methyl-1-deoxynojirimycintreated cells contain oligosaccharides of the composition Glc3ManxGlcNAc2 (x = 7, 8, and 9). Inhibition of trimming of the outermost glucose residues does not prevent release of infectious virus with oligosaccharides of the composition Glc3Man7(GlcNAc)2. On the other hand inhibition of the trimming of the innermost glucose residue does inhibit release of infectious virus (Datema, R., Romero, P. A., Legler, G., and Schwarz, R. T. Proc. Nat. Acad. Sci. USA 79, 6787-6791 (1982) ).

=> d que 127

L18 856 SEA FILE=MEDLINE ABB=ON GLUCOSYLCERAMIDASE/CT L22 2280 SEA FILE=MEDLINE ABB=ON GAUCHER DISEASE/CT

L26 264 SEA FILE=MEDLINE ABB=ON L18(L)(TU OR PD OR PK OR AD)/CT

9 SEA FILE=MEDLINE ABB=ON L26 NOT L22

=> d ibib ab 127 1-9

Subheadings

14 - The questions of the than to treat

2001228162 MEDLINE
21164782 PubMed ID: 11264150 AD-administration Gaucheis disease

Plasma glucosylceramide deficiency as notential risk factor L27 ANSWER 1 OF 9

ACCESSION NUMBER: DOCUMENT NUMBER:

Plasma glucosylceramide deficiency as potential risk factor TITLE:

for venous thrombosis and modulator of anticoagulant

protein C pathway.

COMMENT: Comment in: Blood. 2001 Apr 1;97(7):1905

AUTHOR: Deguchi H; Fernandez J A; Pabinger I; Heit J A; Griffin J H

CORPORATE SOURCE: Department of Molecular and Experimental Medicine, The

Scripps Research Institute, La Jolla, CA 92037, USA.

CONTRACT NUMBER: R37HL52246 (NHLBI)

RO1HL21544 (NHLBI)

SOURCE: BLOOD, (2001 Apr 1) 97 (7) 1907-14.

Journal code: 7603509. ISSN: 0006-4971.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH: 200104

ENTRY DATE: Entered STN: 20010502

Last Updated on STN: 20010502 Entered Medline: 20010426

AB To assess the relationship between venous thrombosis and plasma glucosylceramide (GlcCer) or phosphatidylethanolamine (PE), plasma levels of GlcCer and PE were determined for 70 venous thrombosis patients referred for evaluation and 70 healthy blood donors. The mean GlcCer level, but not the PE level, was lower in patients versus controls (4.9 vs  $6.5~\rm{microg/mL}$  [P = .0007] and  $66~\rm{vs}$  71 microg/mL [P = .48], respectively). As a measure of relative risk, the odds ratio for deep vein thrombosis in subjects with GlcCer levels below the 10th percentile of controls was 5.7 (95% CI, 2.3-14). To assess the influence of glycolipids on anticoagulant response to activated protein C (APC):protein S in modified prothrombin time assays, the effects of depleting endogenous plasma GlcCer by glucocerebrosidase treatment or of adding exogenous purified GlcCer or other neutral glycolipids to plasma were tested. Glucocerebrosidase treatment reduced plasma sensitivity to APC: protein S in parallel with GlcCer reduction. Exogenously added GlcCer and the homologous Glc-containing globotriaosylceramide (Gb3Cer), but not galactosylceramide, dose-dependently prolonged clotting times of normal plasma in the presence, but not absence, of APC:protein S, which suggests that GlcCer or Gb3Cer can enhance protein C pathway anticoagulant activity. In studies using purified proteins, inactivation of factor Va by APC:protein S was enhanced by GlcCer alone and by GlcCer in multicomponent vesicles containing phosphatidylserine and phosphatidylcholine. These results suggest that the neutral glycolipids GlcCer and Gb3Cer may directly contribute to the anticoagulant activity of the protein C pathway and that deficiency of plasma GlcCer may be a risk factor for venous thrombosis. (Blood. 2001; 97:1907-1914)

L27 ANSWER 2 OF 9

MEDLINE

ACCESSION NUMBER:

2000031171 MEDLINE

DOCUMENT NUMBER:

20031171 PubMed ID: 10566895

TITLE:

Prophylaxis of antibody-induced acute glomerulonephritis

Cook 10/031767 Page 13

with genetically modified bone marrow-derived vehicle

cells.

AUTHOR: Yokoo T; Ohashi T; Utsunomiya Y; Kojima H; Imasawa T;

Kogure T; Hisada Y; Okabe M; Eto Y; Kawamura T; Hosoya T

CORPORATE SOURCE: Department of Internal Medicine (II), Jikei University

School of Medicine, Tokyo, Japan.. tyokoo@jikei.ac.jp

HUMAN GENE THERAPY, (1999 Nov 1) 10 (16) 2673-8.

Journal code: 9008950. ISSN: 1043-0342.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

SOURCE:

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199912

ENTRY DATE: Entered STN: 20000113

Last Updated on STN: 20000113 Entered Medline: 19991216

Glomerulonephritis is an inflammatory disease of the renal glomerulus, AB which often progresses either slowly or rapidly, ending in renal death despite the availability of various antiinflammatory drugs. Gene therapy may be a promising method of suppressing the progression of glomerulonephritis through the blockage of key inflammatory molecule(s). However, the difficulty of local gene delivery into the glomerulus has made the clinical use of gene therapy difficult. As a solution to this issue, we applied a novel ex vivo technique that may allow site-specific gene delivery into the inflamed site and thus suppress local inflammation in the glomerulus, and examined the feasibility of this system as a prophylaxis of glomerulonephritis. The gene encoding the antiinflammatory cytokine interleukin 1 receptor antagonist (IL-1ra) was delivered into animal models of inflamed glomeruli evoked by anti-glomerular basement membrane antibody; this animal model is an analog of the human Goodpasture syndrome. Vehicle cells did indeed accumulate in the glomeruli on the induction of nephritis and were confirmed to secrete recombinant IL-1ra. Renal functions as well as morphology were preserved by this intervention for up to 14 days after IL-1ra introduction. These data demonstrate the possible application of gene therapy for acute glomerulonephritis. A gene encoding an antiinflammatory molecule, IL-1 receptor antagonist, was delivered into inflamed glomeruli, using a technique that may allow site-specific gene delivery into inflamed tissues. The progression of experimental acute glomerulonephritis was effectively suppressed by this intervention for at least 14 days after gene introduction. This success may strengthen the rationale for gene therapy in the treatment of inflammatory diseases such as glomerulonephritis.

L27 ANSWER 3 OF 9 MEDLINE

ACCESSION NUMBER: 1999045001 MEDLINE

DOCUMENT NUMBER: 99045001 PubMed ID: 9829536

TITLE: Long-term expression, systemic delivery, and macrophage

uptake of recombinant human glucocerebrosidase in mice transplanted with genetically modified primary myoblasts. Liu C; Dunigan J T; Watkins S C; Bahnson A B; Barranger J A

CORPORATE SOURCE: Department of Human Genetics, Graduate School of Public

Health, University of Pittsburgh, PA 15261, USA.

CONTRACT NUMBER: DK 43709 (NIDDK)

SOURCE: HUMAN GENE THERAPY, (1998 Nov 1) 9 (16) 2375-84.

Journal code: 9008950. ISSN: 1043-0342.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199901

AUTHOR:

ENTRY DATE: Entered STN: 19990128

Last Updated on STN: 19990128 Entered Medline: 19990114 AB A critical requirement for treatment of Gaucher disease via systemic delivery of recombinant GC is that secreted enzyme be in a form available for specific takeup by macrophages in vivo. In this article we investigated if transplanted primary myoblasts can sustain expression of human GC in vivo and if the secreted transgene product is taken up by macrophages. Transduced primary murine myoblasts were implanted into syngeneic C3H/HeJ mice. The results demonstrated that transplanted mice sustained long-term expression of transferred human GC gene in vivo. Furthermore, human GC is secreted into the circulation of mice transplanted with syngeneic primary myoblasts retrovirally transduced with human GC cDNA. The transplanted primary myoblasts differentiate and fuse with adjacent mature myofibers, and express the transgene product for up to 300 days. Human GC in the circulation reaches levels of 20-280 units/ml  $\,$ of plasma. Immunohistochemical studies of the target organs revealed that the secreted human GC is taken up by macrophages in liver and bone marrow. Immunochemical identification of reisolated myoblasts from transplanted mice showed that MFG-GC-transduced cells also survived as muscle stem cells in the implanted muscle. These results present in encouraging prospect for the treatment of Gaucher disease.

L27 ANSWER 4 OF 9 MEDLINE

ACCESSION NUMBER: 96124641 MEDLINE

DOCUMENT NUMBER: 96124641 PubMed ID: 8577062

TITLE: Enzyme replacement therapy of patients with lysosomal

storage disease.

AUTHOR: Takada G; Takahashi T

CORPORATE SOURCE: Akita University School of Medicine, Department of

Pediatrics.

SOURCE: NIPPON RINSHO. JAPANESE JOURNAL OF CLINICAL MEDICINE, (1995)

Dec) 53 (12) 3077-82. Ref: 22

Journal code: 0420546. ISSN: 0047-1852.

PUB. COUNTRY: Japan

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: Japanese

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199603

ENTRY DATE: Entered STN: 19960321

Last Updated on STN: 19960321 Entered Medline: 19960312

The history and bases of enzyme replacement therapy are briefly reviewed. The enzyme replacement therapy for Gaucher disease type 1, which has been developed for clinical use and is about to be introduced in our country, was described somewhat in detail under the items of the modification of human placental glucocerebrosidase into the macrophage-terminated enzyme, its clinical usage, effects and their evaluations, adverse effects, and new attempts of its application for Gaucher disease types II and III, now being under clinical trials. Also touched are developments of other enzymes for such lysosomal diseases as Fabry disease, Pompe disease, Hurler syndrome, Hunter disease, and Sly disease.

L27 ANSWER 5 OF 9 MEDLINE

ACCESSION NUMBER: 96031106 MEDLINE

DOCUMENT NUMBER: 96031106 PubMed ID: 8550385

TITLE: A biochemical and immunocytochemical study on the targeting

of alglucerase in murine liver.

AUTHOR: Willemsen R; Tibbe J J; Kroos M A; Martin B M; Reuser A J;

Ginns E I

CORPORATE SOURCE: Department of Clinical Genetics, Erasmus University,

Rotterdam, The Netherlands.

SOURCE: HISTOCHEMICAL JOURNAL, (1995 Aug) 27 (8) 639-46.

Journal code: 0163161. ISSN: 0018-2214.

Cook 10/031767

Page 15

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199602

ENTRY DATE: Entered STN: 19960306

Last Updated on STN: 19960306 Entered Medline: 19960222

A current hypothesis is that functional qlucocerebrosidase needs to be delivered to the lysosomes of tissue macrophages to guarantee successful enzyme therapy for Gaucher's disease. In this study, biochemical and immunohistochemical techniques were applied to identify in mice the localization of intravenously administered alglucerase (human modified placental glucocerebrosidase). Only in liver and spleen was a significant increase of glucocerebrosidase activity observed, with a maximum level at 15 minutes after enzyme infusion. The uptake of enzyme by liver was sufficiently high to allow more detailed studies on the (sub)cellular distribution of human alglucerase. The enzyme in liver is localized both in the endosomal-lysosomal system of the Kupffer cells and the endothelial cells lining the lumen of the sinusoids. Uptake by both of these types of cell is prevented by mannan. The results suggest that the cellular mechanisms responsible for improvement of Gaucher patients receiving alglucerase treatment is probably more complicated than previously recognized.

L27 ANSWER 6 OF 9 MEDLINE

ACCESSION NUMBER: 95123042 MEDLINE

DOCUMENT NUMBER: 95123042 PubMed ID: 7822772

TITLE: Immunoelectron microscopic localization of mannose-terminal

glucocerebrosidase in lysosomes of rat liver Kupffer cells.

AUTHOR: Murray G J; Jin F S

CORPORATE SOURCE: Developmental and Metabolic Neurology Branch, National

Institute of Neurological Disorders and Stroke, National

Institutes of Health, Bethesda, Maryland.

SOURCE: JOURNAL OF HISTOCHEMISTRY AND CYTOCHEMISTRY, (1995 Feb) 43

(2) 149-58.

Journal code: 9815334. ISSN: 0022-1554.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199502

ENTRY DATE: Entered STN: 19950223

Last Updated on STN: 19950223 Entered Medline: 19950214

Knowledge of the cellular distribution and subcellular localization of AB mannose-terminal glucocerebrosidase after intravenous infusion is necessary for understanding the efficacy of targeted enzyme replacement therapy for Gaucher's disease. Selective uptake of mannose-terminal glucocerebrosidase by Kupffer cells in rat liver has been previously demonstrated biochemically. In this study we used immunohistochemical and immunogold labeling techniques to provide direct visual proof for the localization of the delivered enzyme. Light microscopy confirmed biochemical data identifying non-parenchymal cells as the primary target of the modified glucocerebrosidase. Using a primary antibody specific for glucocerebrosidase and a secondary gold-conjugated antibody, we used immunoelectron microscopy to quantify the extent and distribution of exogenous enzyme in various cell types in rat liver and its localization within their respective subcellular organelles. Thirty minutes after intravenous administration of mannose-terminal glucocerebrosidase, enzyme was localized primarily in lysosomes of Kupffer cells. Of eight intact Kupffer cells counted, 16 of 21 lysosomes (78%) contained immunogold conjugates (average concentration 293 gold particles/micron 2). Of 589

particles counted in these lysosomes, 485 (82%) were localized within the lumen of the lysosome; only 104 (18%) were membrane-associated. Five of the 21 lysosomes counted were negative for gold. No gold particles were found in the mitochondria of Kupffer cells and very few particles (8.2/microns 2) were found over the nucleus. The density of gold particles was also low over the nucleus (7.2/microns 2), mitochondria (8.8/microns 2), and lysosomes (7.9/microns 2) of hepatocytes. No specific labeling was observed in erythrocytes, platelets, lymphocytes, pit cells, fat-storing cells, or bile duct. Background labeling of control liver sections from rats receiving saline injection was 8.2 +/- 1.4 gold particles/microns 2.We conclude that mannose-terminal glucocerebrosidase is delivered to the lysosomes of Kupffer cells in liver and that it is distributed both within the lumen (82%) and over the membrane (18%) of the lysosome, with a slight preferential association with the membrane. These findings may provide insights into the design of more effective therapeutic enzyme preparations for the treatment of Gaucher's disease.

L27 ANSWER 7 OF 9 MEDLINE

ACCESSION NUMBER: 86161718 MEDLINE

DOCUMENT NUMBER: 86161718 PubMed ID: 3913525

TITLE: Erythrocyte carriers. AUTHOR: Ihler G M; Tsang H C

SOURCE: CRITICAL REVIEWS IN THERAPEUTIC DRUG CARRIER SYSTEMS,

(1985) 1 (2) 155-87. Ref: 202

Journal code: 8511159. ISSN: 0743-4863.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198605

ENTRY DATE: Entered STN: 19900321

Last Updated on STN: 19980206 Entered Medline: 19860506

The properties of erythrocytes used as carriers for drugs, enzymes, and DNA will be reviewed. One potential application is delivery of these substances to cells responsible for or capable of erythrophagocytosis and are located primarily in the liver and the spleen. A second potential application depends on the ability of loaded cells to survive for substantial periods of time in the circulation after reinfusion. Circulating cells used as drug carriers may be able to modify the pharmacokinetics of administered drugs and if used as enzyme carriers, they may be able to alter the level of various substances in the plasma. Erythrocytes in vitro may fuse with recipient cells, introducing their contents in a functional form into recipient cells. Nucleic acids, either RNA or DNA, as well as enzymes or other entrapped substances, may be transferred in this manner.

L27 ANSWER 8 OF 9 MEDLINE

ACCESSION NUMBER: 86103228 MEDLINE

DOCUMENT NUMBER: 86103228 PubMed ID: 4084247

TITLE: Targeting of synthetically glycosylated human placental

glucocerebrosidase.

AUTHOR: Murray G J; Doebber T W; Shen T Y; Wu M S; Ponpipom M M;

Bugianesi R L; Brady R O; Barranger J A

SOURCE: BIOCHEMICAL MEDICINE, (1985 Oct) 34 (2) 241-6.

Journal code: 0151424. ISSN: 0006-2944.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198602

ENTRY DATE: Entered STN: 19900321

Last Updated on STN: 19900321 Entered Medline: 19860218

Human placental beta-glucocerebrosidase modified by covalent attachment of AB N2-(N2, N6-bis [3-(alpha-D-mannopyranosylthio)propionyl]-Llysyl)-N6-[3-(alpha-D-mannopyranosylthio)propionyl}-L-lysine was administered to rats by intravenous injection. Comparison of enzyme distribution in isolated liver cell populations indicates an increase in enzyme-specific activity of 18-fold in nonparenchymal cells and only 1.5-fold to hepatocytes compared to uninjected control animals. This macrophage-specific delivery of an active lysosomal enzyme has potential for application in enzyme replacement trials.

MEDLINE L27 ANSWER 9 OF 9

MEDLINE 85199027 ACCESSION NUMBER:

PubMed ID: 3994697 85199027 DOCUMENT NUMBER:

Lectin-specific targeting of beta-glucocerebrosidase to TITLE:

different liver cells via glycosylated liposomes.

Das P K; Murray G J; Zirzow G C; Brady R O; Barranger J A AUTHOR:

BIOCHEMICAL MEDICINE, (1985 Feb) 33 (1) 124-31. SOURCE:

Journal code: 0151424. ISSN: 0006-2944.

United States PUB. COUNTRY:

Journal; Article; (JOURNAL ARTICLE) DOCUMENT TYPE:

English LANGUAGE:

Priority Journals FILE SEGMENT:

198506 ENTRY MONTH:

Entered STN: 19900320 ENTRY DATE:

Last Updated on STN: 19900320 Entered Medline: 19850614

Galactosylated and mannosylated liposomes were more efficient in AΒ transporting liposome-entrapped beta-glucocerebrosidase to liver compared to nonglycosylated liposomes. The enzyme entrapped to glycoside-bearing liposomes was found to be cleared at a much faster rate than that entrapped in liposomes having no sugar on their surface. Asialoorosomucoid and hydrolyzed mannan were found to inhibit both the clearance and the uptake of galactosylated and mannosylated liposomes, respectively, supporting involvement of lectin-sugar interaction. Further studies on the uptake of glucocerebrosidase by isolated liver cells revealed that the enzyme entrapped in mannosylated liposomes has much higher affinity for nonparenchymal cells whereas the assimilation of the entrapped enzyme into hepatocytes is clearly favored for liposomes having galactose on their surface.

=> fil capl; d que nos 136; fil medl; d que nos 150; fil embase; d que nos 171; d que nos 166; fil wpids; d que 190
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L9	152	SEA	FILE=REGISTRY SSS FUL L7
L11			FILE=MEDLINE ABB=ON 1-DEOXYNOJIRIMYCIN/CT
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L48	424	SEA	FILE=MEDLINE ABB=ON (L11 OR L15)
L49	2280	SEA	FILE=MEDLINE ABB=ON GAUCHER DISEASE/CT
L50	10	SEA	FILE=MEDLINE ABB=ON L48 AND L49

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FILE LAST UPDATED: 10 OCT 2002 <20021010/UP>
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349 SEA FILE=EMBASE ABB=ON L61(L)DT/CT

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L87	266	SEA	FILE=WPIDS	ABB=ON	GAUCHER?
L89	39	SEA	FILE=WPIDS	ABB=ON	?DEOXY NOJIRIMYCIN?
L90	· 5	SEA	FILE=WPIDS	ABB=ON	(L89 OR L86) AND L87

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PROCESSING COMPLETED FOR L50
PROCESSING COMPLETED FOR L36
PROCESSING COMPLETED FOR L66
PROCESSING COMPLETED FOR L71
PROCESSING COMPLETED FOR L90
             30 DUP REM L50 L36 L66 L71 L90 (12 DUPLICATES REMOVED)
                ANSWERS '1-10' FROM FILE MEDLINE
                ANSWERS '11-19' FROM FILE CAPLUS
                ANSWERS '20-29' FROM FILE EMBASE
                ANSWER '30' FROM FILE WPIDS
=> d ibib ab hitstr 199 11-19; d iall 1-10; d iall 20-30
L99 ANSWER 11 OF 30 CAPLUS COPYRIGHT 2002 ACS
                                                       DUPLICATE 1
                         2001:78266 CAPLUS
ACCESSION NUMBER:
DOCUMENT NUMBER:
                         134:125957
TITLE:
                         Use of N-alkyl derivatives of deoxynojirimycin and
                         glucocerebrosidase for the treatment of glycolipid
                        storage diseases
INVENTOR(S):
                         Jacob, Gary S.; Dwek, Raymond A.
PATENT ASSIGNEE(S):
                        G.D. Searle & Co., USA
SOURCE:
                        PCT Int. Appl., 27 pp.
                         CODEN: PIXXD2
DOCUMENT TYPE:
                         Patent
LANGUAGE:
                         English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:
     PATENT NO.
                 KIND DATE
                                          APPLICATION NO.
                            -----
     WO 2001007078 A1
                            20010201
                                         WO 2000-US16340 20000724
        W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR,
             CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU,
            ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU,
            LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE,
             SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA,
             ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
        RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY,
            DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ,
            CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG
    EP 1196190
                                        EP 2000-946807
                           20020417
                      A1
                                                           20000724
            AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
             IE, SI, LT, LV, FI, RO
    US 2001044453
                     A1
                            20011122
                                          US 2001-859928
                                                           20010517
    US 2002127213
                      Α1
                            20020912
                                          US 2002-54802
                                                            20020122
PRIORITY APPLN. INFO.:
                                        US 1999-145568P P 19990726
                                        US 2000-620026
                                                        A3 20000720
```

AB A combination drug therapy is disclosed for the treatment of a patient

WO 2000-US16340 W 20000724

affected with Gaucher's disease or other such glycolipid storage diseases. The method comprises administering a therapeutically effective amt. of both a N-alkyl deriv. of deoxynojirimycin and glucocerebrosidase to alleviate or inhibit the glycolipid storage disease. The alkyl group has from about two to about 20 carbon atoms and preferably is Bu, nonyl or decyl.

IT 81117-35-3

RL: BAC (Biological activity or effector, except adverse); BPR (Biological process); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)

(deoxynojirimycin N-alkyl derivs. and glucocerebrosidase for the treatment of **Gaucher's** disease or other glycolipid storage diseases)

RN 81117-35-3 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-nonyl-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

IT 72599-27-0, N-Butyl-deoxynojirimycin 79206-12-5

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(deoxynojirimycin N-alkyl derivs. and glucocerebrosidase for the treatment of **Gaucher's** disease or other glycolipid storage diseases)

RN 72599-27-0 CAPLUS

CN 3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 79206-12-5 CAPLUS

CN 3,4,5-Piperidinetriol, 1-decyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

HO 
$$R$$
  $S$   $OH$ 

REFERENCE COUNT: 1 THERE ARE 1 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 12 OF 30 CAPLUS COPYRIGHT 2002 ACS DUPLICATE 2

ACCESSION NUMBER: 2001:474848 CAPLUS

DOCUMENT NUMBER: 136:209862

TITLE: Inhibition of substrate synthesis as a strategy for

glycolipid lysosomal storage disease therapy

AUTHOR(S): Platt, F. M.; Jeyakumar, M.; Andersson, U.; Priestman,

D. A.; Dwek, R. A.; Butters, T. D.; Cox, T. M.; Lachmann, R. H.; Hollak, C.; Aerts, J. M. F. G.; Van Weely, S.; Hrebicek, M.; Moyses, C.; Gow, I.; Elstein,

D.; Zimran, A.

CORPORATE SOURCE: Glycobiology Institute, Department of Biochemistry,

University of Oxford, Oxford, UK

SOURCE: Journal of Inherited Metabolic Disease (2001), 24(2),

275-290

CODEN: JIMDDP; ISSN: 0141-8955
PUBLISHER: Kluwer Academic Publishers
DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

A review. The glycosphingolipid (GSL) lysosomal storage diseases are AΒ caused by mutations in the genes encoding the glycohydrolases that catabolize GSLs within lysosomes. In these diseases the substrate for the defective enzyme accumulates in the lysosome and the stored GSL leads to cellular dysfunction and disease. The diseases frequently have a progressive neurodegenerative course. The therapeutic options for treating these diseases are relatively limited, and for the majority there are no effective therapies. The problem is further compounded by difficulties in delivering therapeutic agents to the brain. Most research effort to date has focused on strategies for augmenting enzyme levels to compensate for the underlying defect. These include bone marrow transplantation (BMT), enzyme replacement and gene therapy. An alternative strategy that we have been exploring is substrate deprivation. This approach aims to balance the rate of GSL synthesis with the impaired rate of GSL breakdown. The imino sugar N-butyldeoxynojirimycin (NB-DNJ) inhibits the first step in GSL biosynthesis and has been used to evaluate this approach: Studies in an asymptomatic mouse model of Tay-Sachs disease have shown that substrate deprivation prevents GSL storage in the CNS. In a severe neurodegenerative mouse model of Sandhoff disease, substrate deprivation delayed the onset of symptoms and disease progression and significantly increased life expectancy. Combining NB-DNJ and BMT was found to be synergistic in the Sandhoff mouse model. A clin. trial in type I Gaucher disease has been undertaken and has shown beneficial effects. Efficacy was demonstrated on the basis of significant decreases in liver and spleen vols., gradual but significant improvement in hematol. parameters and disease activity markers, together with diminished GSL biosynthesis and storage as detd. by independent biochem. assays. Further trials in type I Gaucher disease are in progress; studies are planned in patients with GSL storage in the CNS.

IT 72599-27-0, N-Butyldeoxynojirimycin

RL: PAC (Pharmacological activity); THU (Therapeutic

use); BIOL (Biological study); USES (Uses)

(inhibition of substrate synthesis as a strategy for glycolipid lysosomal storage disease therapy)

72599-27-0 CAPLUS

RN CN 3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI)(CA INDEX NAME)

Absolute stereochemistry.

REFERENCE COUNT: 46 THERE ARE 46 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

ANSWER 13 OF 30 CAPLUS COPYRIGHT 2002 ACS

2000:756525 CAPLUS

ACCESSION NUMBER: DOCUMENT NUMBER:

133:317560

TITLE:

Combination of glucosylceramide synthesis inhibitors

DUPLICATE 3

and glycolipid degrading enzyme in therapy

INVENTOR(S):

Dwek, Raymond A.; Butters, Terence D.; Platt, Frances

M.; Priestman, David; Jeyakumar, Mylvaganam

PATENT ASSIGNEE(S):

Oxford Glycosciences (Uk) Ltd., UK PCT Int. Appl., 39 pp.

SOURCE:

LANGUAGE:

CODEN: PIXXD2

DOCUMENT TYPE:

Patent English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

	PA	FENT	NO.		KIND DATE				A	PPLI	CATI	٥.	DATE						
	WO	2000	 0627	 79	Α.	1	20001026			WO 2000-GB1560					2000	0420			
	W: AE, AG,			AG,	AL,	AM,	AT,	AU,	AZ,	BA,	BB,	BG,	BR,	BY,	CA,	CH,	CN,	CR,	
			CU,	CZ,	DE,	DK,	DM,	DZ,	EE,	ES,	FI,	GB,	GD,	GE,	GH,	GM,	HR,	HU,	
			ID,	IL,	IN,	IS,	JP,	KE,	KG,	ΚP,	KR,	ΚZ,	LC,	LK,	LR,	LS,	LT,	LU,	
			LV,	MA,	MD,	MG,	MK,	MN,	MW,	MX,	NO,	ΝZ,	PL,	PT,	RO,	RU,	SD,	SE,	
			SG,	SI,	SK,	SL,	ТJ,	TM,	TR,	TT,	TZ,	UA,	UG,	US,	UZ,	VN,	YU,	ZA,	
			ZW,	AM,	AZ,	BY,	KG,	ΚZ,	MD,	RU,	ТJ,	TM							
		RW:	GH,	GM,	KE,	LS,	MW,	SD,	SL,	SZ,	TZ,	UG,	ZW,	AT,	BE,	CH,	CY,	DE,	
			DK,	ES,	FI,	FR,	GB,	GR,	ΙE,	ΙT,	LU,	MC,	NL,	PT,	SE,	BF,	ВJ,	CF,	
			CG,	CI,	CM,	GΑ,	GN,	GW,	ML,	MR,	NE,	SN,	TD,	TG					
	BR	2000	0099	13	A 20020108					BR 2000-9913						20000420			
	EΡ	1171	128		A.	1	2002	0116		EP 2000-920920						0420			
		R:	ΑT,	BE,	CH,	DE,	DK,	ES,	FR,	GB,	GR,	ΙT,	LI,	LU,	NL,	SE,	MC,	PT,	
			IE,	FI															
	NO	2001	0051	11	Α		2001	1212		No	20	01-5	111		2001	1019			
	US	2002	1429	85	A1 20021003				US 2001-42527					20011019					
PRIO	RIT	Y APP	LN.	INFO	. :				(	GB 19	999-	9066		Α	19990	0420			
	WO 2000-GB1560														20000				
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AB The present invention provides the use of an inhibitor of glycolipid synthesis, such as N-butyldeoxynojirimycin (NB-DNJ), Nbutyldeoxygalactonojirimycin (NB-DGJ) or N-nonyldeoxynojirimycin (NN-DNJ), and an agent capable of increasing the rate of glycolipid degrdn. in the manuf. of a medicament for the treatment of a disorder which has at least a component based on glycolipid storage. Such disorders include Gaucher disease, Sandhoff's disease, Fabry's disease, Tay-Sach's disease, Niemann-Pick C storage disease, GM1 gangliosidosis, genetic disorders in which neuronal glycolipid accumulation contributes to the disease's pathol., e.g. mucopolysaccharidoses, neurol. disorders in which glucosylceramide-contg. glycolipid accumulation contributes to the disease's pathol. such as Alzheimer's disease, stroke and epilepsy, cancers of neuronal origin such as glioblastoma and astrocytoma, and cancers originating outside neuronal tissue but presenting with neuronal metastases. For example, Sandhoff mice were bone marrow transplanted (BMT) at 2 wk of age and drug therapy initiated at 9.5-11 wk of age (NB-DNJ 600 mg/kg/day). Survival curves were plotted for each group of animals with each point on the graph representing a death. The untreated group (no BMT, no drug) survived (longest survivor) until 140 days, NB-DNJ only (no BMT) survived until 170 days, BMT only (no NB-DNJ) survived until 200 days, and NB-DNJ plus BMT had extended survival from 200-280 days. The data show synergy approx. 13% above additive.

IT 72599-27-0, N-Butyldeoxynojirimycin 81117-35-3

RL: BAC (Biological activity or effector, except adverse); BPR (Biological process); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)

(combination of glucosylceramide synthesis inhibitors and glycolipid degrading enzyme in therapy)

RN 72599-27-0 CAPLUS

CN

3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 81117-35-3 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-nonyl-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

$$\begin{array}{c} \text{Me} \\ \text{(CH2)8} \\ \text{HO} \\ \begin{array}{c} \text{R} \\ \text{R} \\ \text{OH} \end{array} \end{array}$$

REFERENCE COUNT:

9 THERE ARE 9 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

DUPLICATE 4 L99 ANSWER 14 OF 30 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER:

2000:401653 CAPLUS

DOCUMENT NUMBER:

133:38241

TITLE:

Use of long-chain N-alkyl derivatives of

deoxynojirimycin for the manufacture of a medicament for the treatment of glycolipid storage diseases Jacob, Gary S.; Platt, Frances M.; Butters, Terry D.;

Dwek, Raymond A.

PATENT ASSIGNEE(S):

G.D. Searle & Co., USA; University of Oxford

SOURCE:

PCT Int. Appl., 38 pp. CODEN: PIXXD2

DOCUMENT TYPE:

INVENTOR(S):

Patent

LANGUAGE:

English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PATE	INT NO.		KIND DATE					A.	PPLI	CATI	Э.	DATE				
WO 2	20000338	43	A1 20000615					WO 1999-US27918 19991208								
	W: AE,	AL,	AM,	AT,	AU,	AZ,	BA,	BB,	BG,	BR,	BY,	CA,	CH,	CN,	CR,	CU,
	CZ,	DE,	DK,	DM,	EE,	ES,	FI,	GB,	GD,	GE,	GH,	GM,	HR,	HU,	ID,	IL,
	IS,	JP,	ΚE,	KG,	KP,	KR,	KΖ,	LC,	LK,	LR,	LS,	LT,	LU,	LV,	MD,	MG,
	MK,	MN,	MW,	MX,	NO,	NZ,	PL,	PT,	RO,	RU,	SD,	SE,	SG,	SI,	SK,	SL,
	ТJ,	TM,	TR,	TT,	TZ,	UA,	UG,	US,	UZ,	VN,	YU,	ZA,	ZW,	AM,	ΑZ,	BY,
	KG,	ΚZ,	MD,	RU,	ТJ,	TM										
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	DK,	ES,	FI,	FR,	GB,	GR,	ΙE,	ΙΤ,	LU,	MC,	NL,	PT,	SE,	BF,	ВJ,	CF,
	CG,	CI,	CM,	GA,	GN,	GW,	ML,	MR,	ΝE,	SN,	TD,	TG				
EP 1	.137416		A.	1	2001	1004	EP 1999-967135 19991208									
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	IE,	SI,	LT,	LV,	FI,	RO										
JP 2	JP 2002531505 T2 2002092							J	P 20	00-5	8633.	5	1999	1208		
PRIORITY	APPLN.	INFO.	. :				US 1998-111683P P 19981210									
						1	WO 1	999-1	JS27	918	M	1999	1208			

AΒ A method is disclosed for the treatment of a patient affected with Gaucher's disease or other such glycolipid storage diseases. The method comprises administering to said patient a therapeutically effective amt. of a long-chain N-alkyl deriv. of deoxynojirimycin to alleviate or inhibit the glycolipid storage disease. The long-chain alkyl group has from nine to about 20 carbon atoms and preferably is nonyl or decyl.

ΙT 72599-27-0, N-Butyldeoxynojirimycin

> RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); BIOL (Biological study)

(deoxynojirimycin long-chain N-alkyl derivs. for treatment of glycolipid storage diseases)

RN 72599-27-0 CAPLUS

3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) CN (CA INDEX NAME)

Absolute stereochemistry.

T72458-45-8 79206-10-3 79206-12-5
 79206-22-7 81117-35-3 121133-60-6
 274902-52-2 274902-53-3
 RL: BAC (Biological activity or effector, except adverse); BSU
 (Biological study, unclassified); THU (Therapeutic use); BIOL
 (Biological study); USES (Uses)
 (deoxynojirimycin long-chain N-alkyl derivs. for treatment of
 glycolipid storage diseases)
RN 72458-45-8 CAPLUS
CN 3,4,5-Piperidinetriol, 1-heptyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI)
 (CA INDEX NAME)

Absolute stereochemistry.

RN 79206-10-3 CAPLUS
CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-octyl-, (2R,3R,4R,5S)- (9CI)
(CA INDEX NAME)

Absolute stereochemistry.

$$\begin{array}{c} \text{Me} \\ \text{(CH2)7} \\ \text{N} \\ \text{R} \\ \text{R} \\ \text{OH} \end{array}$$

RN 79206-12-5 CAPLUS CN 3,4,5-Piperidinetriol, 1-decyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

HO 
$$\begin{pmatrix} (CH_2) & 9 \end{pmatrix}$$
  $\begin{pmatrix} R & S \\ R & S \end{pmatrix}$   $\begin{pmatrix} R & S \\ OH \end{pmatrix}$ 

RN 79206-22-7 CAPLUS

CN 3,4,5-Piperidinetriol, 1-dodecyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 81117-35-3 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-nonyl-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 121133-60-6 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-pentyl-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 274902-52-2 CAPLUS

CN 3,4,5-Piperidinetriol, 1-(11Z)-11-hexadecenyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

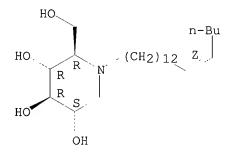
Double bond geometry as shown.

RN 274902-53-3 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-(13Z)-13-octadecenyl-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

Double bond geometry as shown.



REFERENCE COUNT: 3 THERE ARE 3 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 15 OF 30 CAPLUS COPYRIGHT 2002 ACS DUPLICATE 6

ACCESSION NUMBER: 2000:847070 CAPLUS

DOCUMENT NUMBER: 134:125918

TITLE: Imino sugar therapy for type 1 Gaucher

disease

AUTHOR(S): Priestman, David A.; Platt, Frances M.; Dwek, Raymond

A.; Butters, Terry D.

CORPORATE SOURCE: Glycobiology Institute, Department of Biochemistry,

University of Oxford, Oxford, OX1 3QU, UK

SOURCE: Glycobiology (2000), 10(11), iv-vi

CODEN: GLYCE3; ISSN: 0959-6658

PUBLISHER: Oxford University Press

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Infused .beta.-glucocerebrosidase activity was not inhibited in mice treated with N-butyldeoxynojirimycin, an inhibitor of glycosphingolipid synthesis.

IT 72599-27-0, N-Butyldeoxynojirimycin

RL: BAC (Biological activity or effector, except adverse); BSU

(Biological study, unclassified); BIOL (Biological study)

(effect of N-butyldeoxynojirimycin on serum .beta.-glucocerebrosidase activity)

RN 72599-27-0 CAPLUS

CN 3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

REFERENCE COUNT:

THERE ARE 29 CITED REFERENCES AVAILABLE FOR THIS 29 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 16 OF 30 CAPLUS COPYRIGHT 2002 ACS

DUPLICATE 8

ACCESSION NUMBER:

1995:312535 CAPLUS

DOCUMENT NUMBER:

122:81897

TITLE:

Preparation of N-alkyldeoxygalactonojirimycins as

glycolipid biosynthesis inhibitors.

INVENTOR(S):

Platt, Frances M.; Neises, Gabrielle R.; Dwek, Raymond

A.; Butters, Terry D.

PATENT ASSIGNEE(S):

G.D Searle and Co., USA PCT Int. Appl., 43 pp.

SOURCE:

CODEN: PIXXD2

DOCUMENT TYPE:

Patent

LANGUAGE:

English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PATENT NO.					KIND DATE					i	APPLI	CATI	o. 	DATE				
	WO	9426	<b>-</b> - 714		A1 19941124				1	WO 19	94-U	4	19940511					
		W:	AT,	AU,	BB,	BG,	BR,	BY,	CA,	CH	, CN,	CZ,	DE,	DK,	ES,	FI,	GB,	HU,
			JP,	KP,	KR,	KZ,	LK,	LU,	LV,	MG	, MN,	MW,	NL,	NO,	NZ,	PL,	PT,	RO,
							SK,											
		RW:	AT.	BE.	CH.	DE,	DK,	ES,	FR,	GB	, GR,	IE,	IT,	LU,	MC,	NL,	PT,	SE,
			BF.	ВJ.	CF.	CG.	CI,	CM.	GA,	GN	, ML,	MR,	NE,	SN,	TD,	TG		
	US	5399	567	,	A	,	1995	0321	•	,	US 19	93-6	1645		1993	0513		
	IIS	6291	657		B.	1	2001	0918	US 1993-61645 19930513 US 1993-102654 19930805									
	AII	9467832 698012			A	1	1994	1212	AU 1994-67832 19940511									
	EP				A	1996	0228			EP 19	994-9	1	1994	0511				
		6980																
		R:	AT.	BE.	CH.	DE.	DK.	ES.	FR,	GB	, GR	IE,	IT,	LI,	LU,	NL,	PT,	SE
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	US	5525	616		A	_	1996	0611			US 19	95-4	3984	2	1995	0512		
	IIS	5801	185		A		1998	0901				997-7						
PRIOF										US		-6164						
LICIOI	(11)			11110	• •							-1026						
												-US49						
												-3217						
												-3936						
												-6505						
							<i>-</i> 1										. 1 1	1

- Novel N-alkyl derivs. of deoxygalactonojirimycin in which said alkyl AΒ contains 3-6 C atoms were prepd. These novel compds. are useful for selectively inhibiting glycolipid synthesis. Thus, deoxygalactononojirimycin, butyraldehyde, and Pd black were stirred in aq. NaOAc buffer at pH 5.0 under H for 16 h at 20.degree. to give N-butyldeoxygalactonojirimycin (NB-DGJ). NB-DGJ reduced binding of cholera toxin to H9 cells by approx. 70%, consistent with the loss of GM1 from the cell surface.
- 141206-24-8P 141206-42-0P 158100-26-6P IT RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); SPN (Synthetic preparation); THU

(Therapeutic use); BIOL (Biological study); PREP (Preparation); USES (Uses)

(prepn. of N-alkyldeoxygalactonojirimycins as glycolipid synthesis inhibitors)

RN 141206-24-8 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-propyl-, (2R,3S,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 141206-42-0 CAPLUS

CN 3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3S,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 158100-26-6 CAPLUS

CN 3,4,5-Piperidinetriol, 1-hexyl-2-(hydroxymethyl)-, (2R,3S,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

$$(CH_2)_{\overline{5}}^{Me}$$
HO R S S OH

L99 ANSWER 17 OF 30 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2001:687476 CAPLUS

DOCUMENT NUMBER:

135:236444

TITLE:

N-alkyl deoxygalactonojirimycin derivatives for

inhibition of glycolipid synthesis

INVENTOR(S): Platt, Frances M.; Neises, Gabrielle R.; Dwek, Raymond

Searched by Barb O'Bryen, STIC 308-4291

A.; Butters, Terry D. Monsanto Company, USA

PATENT ASSIGNEE(S): SOURCE:

U.S., 19 pp., Cont.-in-part of U.S. 5,399,567.

CODEN: USXXAM

DOCUMENT TYPE:

Patent English

LANGUAGE:

FAMILY ACC. NUM. COUNT: 4

PATENT INFORMATION:

```
APPLICATION NO. DATE
    PATENT NO.
                    KIND DATE
    US 6291657
                    В1
                           20010918
                                          US 1993-102654
                                                          19930805
    US 5399567
                           19950321
                                          US 1993-61645
                                                           19930513
                      Α
                           19941124
                                          CA 1994-2159988 19940511
    CA 2159988
                      AΑ
                           19941124
                                          WO 1994-US4974
                                                           19940511
    WO 9426714
                     A1
            AT, AU, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, ES, FI, GB, HU,
            JP, KP, KR, KZ, LK, LU, LV, MG, MN, MW, NL, NO, NZ, PL, PT, RO,
            RU, SD, SE, SI, SK, TT, UA, US, UZ, VN
         RW: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE,
            BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG
                                          AU 1994-67832
                                                         19940511
                      Α1
                           19941212
    AU 9467832
                           19960228
                                          EP 1994-916021
                                                          19940511
    EP 698012
                      Α1
                           19970129
    EP 698012
                      В1
        R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LI, LU, NL, PT, SE
                                           JP 1994-525541 19940511
    JP 08510244
                      Т2
                           19961029
                                          AT 1994-916021
                                                           19940511
    AT 148456
                      Ε
                           19970215
                                           ES 1994-916021
    ES 2097653
                      Т3
                           19970401
                                                           19940511
                                           US 1994-321718
    US 5472969
                      Α
                           19951205
                                                           19941012
    US 5580884
                                           US 1995-396989
                      Α
                           19961203
                                                           19950301
                      Α
                           19960611
                                           US 1995-439842
                                                            19950512
    US 5525616
    US 5786368
                      Α
                           19980728
                                           US 1996-588027
                                                            19960117
                      Α
                           19980825
                                           US 1997-782321
                                                            19970113
    US 5798366
                           19980901
                                           US 1997-782322
                                                           19970113
    US 5801185
                      Α
                                                       A2 19930513
PRIORITY APPLN. INFO.:
                                        US 1993-61645
                                        US 1993-102654
                                                        A 19930805
                                                        W 19940511
                                        WO 1994-US4974
                                        US 1994-321718
                                                        A3 19941012
                                        US 1995-393640
                                                        A2 19950224
                                        US 1995-396989
                                                        A3 19950301
                                        US 1996-588027
                                                        A2 19960117
                                        US 1996-650558
                                                        A1 19960520
```

AB N-(C3-6)alkyl derivs. of deoxygalactonojirimycin are provided. These compds. are useful for selectively inhibiting glycolipid synthesis. N-butyldeoxygalactonojirimycin was prepd. from deoxygalactonojirimycin and butyraldehyde.

IT 69567-10-8 72458-42-5 72458-43-6

72599-27-0, N-Butyldeoxynojirimycin 81117-34-2

105308-35-8 141206-22-6 141206-23-7

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); BIOL (Biological study)

(N-alkyl deoxygalactonojirimycin derivs. for inhibition of glycolipid synthesis)

RN 69567-10-8 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-methyl-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 72458-42-5 CAPLUS

CN 3,4,5-Piperidinetriol, 1-ethyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 72458-43-6 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-propyl-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 72599-27-0 CAPLUS

CN 3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

CN 3,4,5-Piperidinetriol, 1-hexyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 105308-35-8 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-propyl-, (2R,3R,4R,5R)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 141206-22-6 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-methyl-, (2R,3S,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 141206-23-7 CAPLUS

CN 3,4,5-Piperidinetriol, 1-ethyl-2-(hydroxymethyl)-, (2R,3S,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

IT 141206-24-8P 141206-42-0P 158100-26-6P

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); SPN (Synthetic preparation); THU (Therapeutic use); BIOL (Biological study); PREP (Preparation); USES (Uses)

(N-alkyl deoxygalactonojirimycin derivs. for inhibition of glycolipid synthesis)

RN 141206-24-8 CAPLUS

CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-propyl-, (2R,3S,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 141206-42-0 CAPLUS

CN 3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3S,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 158100-26-6 CAPLUS

CN 3,4,5-Piperidinetriol, 1-hexyl-2-(hydroxymethyl)-, (2R,3S,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

HO 
$$\frac{(CH_2)_5}{N}$$
 Me OH

REFERENCE COUNT: 26 THERE ARE 26 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 18 OF 30 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2000:183999 CAPLUS

DOCUMENT NUMBER: 132:329434

TITLE: Molecular requirements of imino sugars for the

selective control of N-linked glycosylation and

glycosphingolipid biosynthesis

AUTHOR(S): Butters, T. D.; Van den Broek, L. A. G. M.; Fleet, G.

W. J.; Krulle, T. M.; Wormald, M. R.; Dwek, R. A.;

Platt, F. M.

CORPORATE SOURCE: Glycobiology Institute, Department of Biochemistry,

Oxford University, Oxford, OX1 3QU, UK

SOURCE: Tetrahedron: Asymmetry (2000), 11(1), 113-124

CODEN: TASYE3; ISSN: 0957-4166

JISHER: Elsevier Science Ltd.

PUBLISHER: Elsevier S

DOCUMENT TYPE: Journal LANGUAGE: English

N-Butyl-deoxynojirimycin (NB-DNJ) has been approved for clin. trials as a potential therapy for Gaucher disease, a glycolipid lysosomal storage disorder. As this compd. has both glycoprotein processing .alpha.-glucosidase and ceramide glucosyltransferase inhibitory activity, we have sought to det. the mol. basis for these two activities. NB-DNJ is known to resemble the pos. charged oxocarbonium-like transition state for .alpha.-glucosidase I and the structure-function relationships we present now help to define the recognition epitope for the enzyme. Inhibition of ceramide glucosyltransferase by NB-DNJ was competitive for ceramide (Ki=7.4 .mu.M) and non-competitive for UDP-glucose, indicating inhibitory activity is by ceramide mimicry. The presence of an N-alkyl chain was obligatory for transferase inhibition and increases in alkyl chain length provided a modest increase in inhibitory potency. By contrast, alpha.-glucosidase inhibition was independent of the N-alkyl chain and changes in chain length. The effects of ring substitutions identified the C3 hydroxyl group as being crit. for both enzymes but C1 and C6 modifications led to a loss of transferase inhibition only. Attempts to rationalize these data for transferase inhibition using an energy minimized mol. model of NB-DNJ and ceramide predicted structural homol. of three stereogenic centers and the N-alkyl chain of NB-DNJ, with the trans-alkenyl and N-acyl chain of ceramide. On the basis of these studies, modifications to imino sugar inhibitors can be suggested that allow a more selective approach for mol. inhibition of both ceramide glucosyltransferase and .alpha.-glucosidase I, leading to improved compds. for the potential treatment of lysosomal glycosphingolipid storage disorders and viral infections, resp.

IT 72599-27-0 79206-12-5 141206-42-0

210708-42-2 267668-04-2
RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); PRP (Properties); THU (Therapeutic

use); BIOL (Biological study); USES (Uses)

(mol. requirements of imino sugars for the selective control of
N-linked glycosylation and glycosphingolipid biosynthesis)
RN 72599-27-0 CAPLUS
CN 3.4.5-Piperidinetriol. 1-butyl-2-(hydroxymethyl)- (2R 3R 4R 5S)- (90

3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 79206-12-5 CAPLUS

CN 3,4,5-Piperidinetriol, 1-decyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

$$\begin{array}{c} \text{Me} \\ \text{(CH2)} \ \ \ \ \ \ \\ \text{N} \\ \text{HO} \\ \begin{array}{c} R \\ \text{R} \\ \text{OH} \end{array} \end{array}$$

RN 141206-42-0 CAPLUS

CN 3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3S,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

RN 210708-42-2 CAPLUS

CN 3,4,5-Piperidinetriol, 1-butyl-2,6-bis(hydroxymethyl)-, stereoisomer (9CI) (CA INDEX NAME)

Absolute stereochemistry. Rotation (+).

RN 267668-04-2 CAPLUS

CN 3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-6-methyl-, (2R,3S,4R,5S,6S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

REFERENCE COUNT:

50

THERE ARE 50 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 19 OF 30 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER:

1999:390377 CAPLUS

DOCUMENT NUMBER:

131:39716

TITLE:

Glucosidase or glucosyltransferase inhibitors for inhibition of membrane-associated viral replication

and treatment of lipid storage diseases

INVENTOR(S):

Blumberg, Baruch S.; Block, Timothy M.; Dwek, Raymond

A.; Mehta, Anand; Platt, Frances; Butters, Terry D.;

Zitzmann, Nicole

PATENT ASSIGNEE(S):

The Chancellor, Masters and Scholars of the University

of Oxford, UK; Thomas Jefferson University

SOURCE:

PCT Int. Appl., 45 pp.

CODEN: PIXXD2

DOCUMENT TYPE:

Patent

LANGUAGE:

English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PATENT NO.				KII	ND !	DATE			A:	PPLI	CATI	N NC	o. 	DATE			
WO 9929321		Al 19990617			WO 1998-US26241 19981210												
	W:	AL,	AM,	AT,	AU,	ΑZ,	BA,	BB,	BG,	BR,	BY,	CA,	CH,	CN,	CU,	CZ,	DE,
		DK,	EE,	ES,	ΓI,	GB,	GD,	GE,	GH,	GM,	HR,	HU,	ID,	IL,	IN,	IS,	JP,
		KE,	KG,	KP,	KR,	KZ,	LC,	LK,	LR,	LS,	LT,	LU,	LV,	MD,	MG,	MK,	MN,
		MW,	MX,	NO,	NZ,	PL,	PT,	RO,	RU,	SD,	SE,	SG,	SI,	SK,	SL,	ТJ,	TM,
		TR,	TT,	UA,	UG,	US,	UZ,	VN,	YU,	ZW,	AM,	ΑZ,	BY,	KG,	ΚZ,	MD,	RU,
		ТJ,	TM														
	RW:	GH,	GM,	KE,	LS,	MW,	SD,	SZ,	UG,	ZW,	ΑT,	BE,	CH,	CY,	DE,	DK,	ES,
		FI,	FR,	GB,	GR,	ΙE,	IT,	LU,	MC,	NL,	PT,	SE,	BF,	ВJ,	CF,	CG,	CI,

CM, GA, GN, GW, ML, MR, NE, SN, TD, TG CA 2312423 AΑ 19990617 CA 1998-2312423 19981210 AU 9917215 **A**1 19990628 AU 1999-17215 19981210 EP 1037636 Α1 20000927 EP 1998-962046 19981210 AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, BR 9813508 20001003 Α BR 1998-13508 19981210 JP 2001525367 T2 20011211 JP 2000-523992 19981210 PRIORITY APPLN. INFO.: US 1997-69245P P 19971211 WO 1998-US26241 W 19981210 OTHER SOURCE(S): MARPAT 131:39716 Methods are disclosed for inhibiting morphogenesis of host cell membrane-budding viruses and infections caused thereby, using compds. that inhibit host cell glucosidase or glucosyltransferase enzymes. Methods are also disclosed for treating lipid storage diseases using compds. that inhibit glucosyltransferase enzymes. IT 72599-27-0 81117-35-3 RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses) (glucosidase or glucosyltransferase inhibitors for inhibition of membrane-assocd. viral replication and treatment of lipid storage diseases) 72599-27-0 CAPLUS RN 3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI) CN

Absolute stereochemistry.

(CA INDEX NAME)

RN 81117-35-3 CAPLUS CN 3,4,5-Piperidinetriol, 2-(hydroxymethyl)-1-nonyl-, (2R,3R,4R,5S)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

REFERENCE COUNT: 2 THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 1 OF 30 MEDLINE DUPLICATE 5

ACCESSION NUMBER: 2000259106 MEDLINE

DOCUMENT NUMBER: 20259106 PubMed ID: 10801168

TITLE: Novel oral treatment of Gaucher's disease with

N-butyldeoxynojirimycin (OGT 918) to decrease substrate

biosynthesis.

COMMENT: Comment in: Lancet. 2000 Aug 19;356(9230):676-7

Comment in: Lancet. 2000 Aug 19;356(9230):677

Cox T; Lachmann R; Hollak C; Aerts J; van Weely S; Hrebicek M; Platt F; Butters T; Dwek R; Moyses C; Gow I; Elstein D;

Zimran A

CORPORATE SOURCE: Department of Medicine, University of Cambridge,

Addenbrooke's Hospital, UK.

SOURCE: LANCET, (2000 Apr 29) 355 (9214) 1481-5.

Journal code: 2985213R. ISSN: 0140-6736.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH: 200005

ENTRY DATE: Entered STN: 20000606

Last Updated on STN: 20020208 Entered Medline: 20000522

ABSTRACT:

AUTHOR:

BACKGROUND: Current treatment for Gaucher's disease involves administration of intravenous glucocerebrosidase to degrade glucocerebroside stored in lysosomes. Lowering the rate of biosynthesis of glucocerebroside should decrease accumulation of this substrate. We investigated the safety and efficacy of OGT 918 (N-butyldeoxynojirimycin), an inhibitor of glucosyltransferase, as a novel oral treatment for non-neuronopathic Gaucher's disease. METHODS: We recruited, into a 1-year open-label study, 28 adults (seven with previous splenectomies) from four national Gaucher's referral clinics, who were unable or unwilling to receive enzyme treatment. We measured liver and spleen volume by computed tomography or magnetic resonance imaging at baseline and at months 6 and 12, and biochemical and haematological variables monthly, including chitotriosidase activity (a sensitive marker of Gaucher's disease activity). Patients were started on 100 mg oral OGT 918 three times daily. FINDINGS: Baseline liver volumes were 1.1-2.7 times normal and spleen volumes 5.1-24.8 times normal. At 12 months, mean liver and spleen volumes were significantly lowered by 12% (95% CI 7.8-16.4) and 19% (14.3-23.7), respectively (each p<0.001). Haematological variables improved slightly. Mean organ volume and blood counts improved continually between 6 months and 12 months of treatment. Mean chitotriosidase concentrations fell by 16.4% over 12 months (p<.0001). Six patients withdrew because of gastrointestinal complaints (two), personal reasons (two), or severe pre-existing disease (two). The most frequent adverse effect was diarrhoea, which occurred in 79% of patients shortly after the start of treatment. INTERPRETATION: Decrease of substrate formation by OGT 918 improves key clinical features of non-neuronopathic Gaucher's disease. The strategy justifies further trials in this and other glycosphingolipid storage disorders.

CONTROLLED TERM: Check Tags: Female; Human; Male; Support, Non-U.S. Gov't

1-Deoxynojirimycin: AE, adverse effects

\*1-Deoxynojirimycin: AA, analogs & derivatives

1-Deoxynojirimycin: PK, pharmacokinetics 1-Deoxynojirimycin: TU, therapeutic use

Administration, Oral

Adult Aged

Diarrhea: CI, chemically induced

Enzyme Inhibitors: AE, adverse effects Enzyme Inhibitors: PK, pharmacokinetics Cook 10/031767 Page 40

\*Enzyme Inhibitors: TU, therapeutic use \*Gaucher Disease: DT, drug therapy

\*Glucosyltransferases: AI, antagonists & inhibitors

Half-Life

Hexosaminidases: BL, blood Liver: DE, drug effects Magnetic Resonance Imaging

Middle Age

Spleen: DE, drug effects Tomography, X-Ray Computed

CAS REGISTRY NO.:

(n-butyldeoxynojirimycin); 72599-27-0 Structure punted (n-butyldeoxynojirimycin) at end 0 (Enzyme Inhibitors); EC 2.4.1.- (Glucosyltransferases); EC 3.2.1.- (Hexosaminidases); EC 3.2.1.- (chitotricaid) CHEMICAL NAME:

L99 ANSWER 2 OF 30 MEDLINE DUPLICATE 7

1999155079 ACCESSION NUMBER: MEDLINE

DOCUMENT NUMBER: 99155079 PubMed ID: 10037475

TITLE: Differential effects of glycolipid biosynthesis inhibitors

on ceramide-induced cell death in neuroblastoma cells.

Bieberich E; Freischutz B; Suzuki M; Yu R K AUTHOR:

Department of Biochemistry and Molecular Biophysics, CORPORATE SOURCE:

Medical College of Virginia of Virginia Commonwealth

University, Richmond 23298-0614, USA.

CONTRACT NUMBER: NS 11853-24 (NINDS)

JOURNAL OF NEUROCHEMISTRY, (1999 Mar) 72 (3) 1040-9. SOURCE:

Journal code: 2985190R. ISSN: 0022-3042.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199903

ENTRY DATE: Entered STN: 19990326

> Last Updated on STN: 20000303 Entered Medline: 19990318

# ABSTRACT:

An in vitro model of Gaucher's disease in murine neuroblastoma x rat glioma NG108-15 cells was used to investigate the physiological effects of two specific inhibitors of glucosylceramide synthase, d,l-threo-1-phenyl-2decanoylamino-3-morpholino-1-propanol (d,1-PDMP) and N-butyldeoxynojirimycin (NB-DNJ), which have been suggested as agents for treatment of glycolipid storage disorders. Incubation of NG108-15 cells with conduritol-B-epoxide, a covalent inhibitor of glucosylceramidase, raised the intracellular concentration of glucosylceramide (GC) by more than fourfold, indicating a glycolipid composition equivalent to that of Gaucher's cells. The level of GC was decreased, and the cells were depleted of gangliosides by postincubation with d,l-PDMP or NB-DNJ. Treatment with d,l-PDMP, but not with NB-DNJ, resulted in a dose-dependent reduction of the growth rate and eventually caused cell death in NG108-15 cells on reaching confluency. An in situ detection assay using terminal nucleotidyltransferase indicated that cell degeneration was accompanied by apoptosis. Lipid analysis by high-performance TLC revealed that on incubation with d,l-PDMP, but not with NB-DNJ, the concentration of endogenous ceramide was elevated by threefold. Ceramide elevation and apoptosis were also observed when NG108-15 cells were incubated with daunorubicin, which was previously reported to induce programmed cell death by stimulation of ceramide synthesis. Structural characterization by HPLC and subsequent laser desorption mass spectrometry revealed that the endogenous ceramide contained fatty acids with chain lengths ranging from C14:0 to C24:0. The results indicate that elevation of levels of these ceramide species by incubation with d,1-PDMP or daunorubicin induces programmed cell death in NG108-15 cells. Because ceramide accumulation and cell death were not observed on incubation with NB-DNJ, its use is suggested to be less toxic than that of d,1-PDMP for treatment of Gaucher's disease and other sphingolipid storage disorders.

Cook 10/031767 Page 41

Check Tags: Animal; Support, U.S. Gov't, P.H.S. CONTROLLED TERM:

1-Deoxynojirimycin: AA, analogs & derivatives

1-Deoxynojirimycin: PD, pharmacology

Apoptosis: DE, drug effects Brain Neoplasms: ME, metabolism \*Brain Neoplasms: PA, pathology Cell Death: DE, drug effects Cell Division: DE, drug effects

Ceramides: ME, metabolism \*Ceramides: PH, physiology Ceramides: TO, toxicity

Enzyme Inhibitors: PD, pharmacology Gaucher Disease: ME, metabolism \*Gaucher Disease: PA, pathology

Glucosylceramides: AI, antagonists & inhibitors Glucosyltransferases: AI, antagonists & inhibitors

\*Glycolipids: AI, antagonists & inhibitors

Glycolipids: BI, biosynthesis

Mice

Morpholines: PD, pharmacology Neuroblastoma: ME, metabolism \*Neuroblastoma: PA, pathology

Tumor Cells, Cultured

CAS REGISTRY NO.: 19130-96-2 (1-Deoxynojirimycin); **72599-27-0** 

(n-butyldeoxynojirimycin); 73257-80-4 (RV 538)

CHEMICAL NAME: 0 (Ceramides); 0 (Enzyme Inhibitors); 0

> (Glucosylceramides); 0 (Glycolipids); 0 (Morpholines); EC 2.4.1.- (Glucosyltransferases); EC 2.4.1.80 (ceramide

glucosyltransferase)

DUPLICATE 9 L99 ANSWER 3 OF 30 MEDLINE

ACCESSION NUMBER:

95014583 MEDLINE

DOCUMENT NUMBER:

95014583 PubMed ID: 7929454

TITLE:

N-butyldeoxygalactonojirimycin inhibits glycolipid

biosynthesis but does not affect N-linked oligosaccharide

processing.

AUTHOR:

SOURCE:

Platt F M; Neises G R; Karlsson G B; Dwek R A; Butters T D CORPORATE SOURCE: Department of Biochemistry, University of Oxford, United

Kingdom.

JOURNAL OF BIOLOGICAL CHEMISTRY, (1994 Oct 28) 269 (43)

27108-14.

Journal code: 2985121R. ISSN: 0021-9258.

PUB. COUNTRY:

United States

DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)

LANGUAGE:

English

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

199411

ENTRY DATE:

Entered STN: 19941222

Last Updated on STN: 20000303 Entered Medline: 19941123

ABSTRACT:

We have previously reported that the imino sugar N-butyldeoxynojirimycin (NB-DNJ) inhibits glycolipid biosynthesis, in addition to its known activity as an inhibitor of the N-linked oligosaccharide processing enzyme alpha-qlucosidase I. In an attempt to dissociate these two activities and identify an inhibitor which was more selective for the glycolipid biosynthetic pathway, several imino sugars have been N-alkylated and tested for inhibitory activity. The galactose analogue N-butyldeoxygalactonojirimycin (NB-DGJ) was found to be a potent inhibitor of glycolipid biosynthesis but in contrast to NB-DNJ had no effect on the maturation of N-linked oligosaccharides or on lysosomal glucocerebrosidase. The effect of increasing N-alkyl chain length on

Cook 10/031767 Page 42

glycolipid inhibition was investigated. Nonalkylated DGJ, the N-methyl and N-ethyl derivatives, were noninhibitory. However, N-propylation resulted in partial inhibition while the N-butyl and N-hexyl derivatives resulted in maximal inhibition. Increasing alkyl chain length also resulted in increased potency of glucosyltransferase inhibition. In an in vitro Gaucher's disease model NB-DGJ was as effective as NB-DNJ in preventing glycolipid storage and may represent a more selective potential therapeutic agent than NB-DNJ for the management of this and other glycosphingolipidoses.

CONTROLLED TERM: Check Tags: Animal; Comparative Study; Human; Support,

Non-U.S. Gov't

\*1-Deoxynojirimycin: AA, analogs & derivatives

1-Deoxynojirimycin: PD, pharmacology

Cells, Cultured

Disease Models, Animal

Gaucher Disease: ME, metabolism
Glucosylceramidase: DE, drug effects

Glucosyltransferases: AI, antagonists & inhibitors

\*Glycolipids: BI, biosynthesis

Mice

\*Oligosaccharides: BI, biosynthesis Structure-Activity Relationship alpha-Glucosidases: DE, drug effects

CAS REGISTRY NO.: 19130-96-2 (1-Deoxynojirimycin); 72599-27-0

(n-butyldeoxynojirimycin)

CHEMICAL NAME: 0 (Glycolipids); 0 (N-butyldeoxygalactonojirimycin); 0

(Oligosaccharides); EC 2.4.1.- (Glucosyltransferases); EC 2.4.1.80 (ceramide glucosyltransferase); EC 3.2.1.20 (alpha-Glucosidases); EC 3.2.1.45 (Glucosylceramidase)

L99 ANSWER 4 OF 30 MEDLINE DUPLICATE 10

ACCESSION NUMBER: 94179218 MEDLINE

DOCUMENT NUMBER: 94179218 PubMed ID: 8132559

TITLE: N-butyldeoxynojirimycin is a novel inhibitor of glycolipid

biosynthesis.

AUTHOR: Platt F M; Neises G R; Dwek R A; Butters T D

CORPORATE SOURCE: Department of Biochemistry, University of Oxford, United

Kingdom.

SOURCE: JOURNAL OF BIOLOGICAL CHEMISTRY, (1994 Mar 18) 269 (11)

8362-5.

Journal code: 2985121R. ISSN: 0021-9258.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199404

ENTRY DATE: Entered STN: 19940428

Last Updated on STN: 20000303 Entered Medline: 19940418

### ABSTRACT:

The imino sugar deoxynojirimycin and its alkylated derivatives are inhibitors of the N-linked oligosaccharide processing enzymes alpha-glucosidase I and II. These compounds are glucose analogues and have the potential to inhibit both glucosidases and glucosyltransferases. However, to date there has been no report of deoxynojirimycin or similar analogues inhibiting a mammalian glucosyltransferase. We have investigated the effects of deoxynojirimycin and its alkylated derivatives on the biosynthesis of glycolipids in HL-60 cells. We have found that the N-butyl and N-hexyl derivatives of deoxynojirimycin, but not deoxynojirimycin itself, are novel inhibitors of the glucosyltransferase-catalyzed biosynthesis of glucosylceramide. This results in the inhibition of biosynthesis of all glucosylceramide-based glycosphingolipids. We have investigated the ability of one of these compounds, N-butyldeoxynojirimycin, to offset glucosylceramide accumulation in an in vitro Gaucher's disease model.

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This compound prevents lysosomal glycolipid storage and offers a novel therapeutic approach for the management of this and other glycolipid storage disorders.

CONTROLLED TERM: Check Tags: Animal; Comparative Study; Human; Support, Non-U.S. Gov't

\*1-Deoxynojirimycin: AA, analogs & derivatives

1-Deoxynojirimycin: PD, pharmacology

Cell Line

Gaucher Disease

Glucosyltransferases: AI, antagonists & inhibitors

Glycolipids: AI, antagonists & inhibitors

\*Glycolipids: BI, biosynthesis Lysosomes: DE, drug effects Lysosomes: UL, ultrastructure Macrophages: DE, drug effects Macrophages: ME, metabolism Macrophages: UL, ultrastructure

Mice

Models, Biological

Structure-Activity Relationship

Tumor Cells, Cultured

\*alpha-Glucosidases: AI, antagonists & inhibitors

CAS REGISTRY NO.: 19130-96-2 (1-Deoxynojirimycin); 72599-27-0

(n-butyldeoxynojirimycin)

CHEMICAL NAME: 0 (Glycolipids); EC 2.4.1.- (Glucosyltransferases); EC

3.2.1.20 (alpha-Glucosidases)

L99 ANSWER 5 OF 30 MEDLINE

ACCESSION NUMBER: 2000438897 MEDLINE

DOCUMENT NUMBER: 20421664 PubMed ID: 10968454

TITLE: Treatment of Gaucher's disease with OGT 918.

COMMENT: Comment on: Lancet. 2000 Apr 29;355(9214):1481-5

AUTHOR: Mistry P K

SOURCE: LANCET, (2000 Aug 19) 356 (9230) 676-7.

Journal code: 2985213R. ISSN: 0140-6736.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: Commentary

Letter

LANGUAGE: English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH: 200009

ENTRY DATE: Entered STN: 20000928

Last Updated on STN: 20020208 Entered Medline: 20000920

CONTROLLED TERM: Check Tags: Human

\*1-Deoxynojirimycin: AE, adverse effects

1-Deoxynojirimycin: AA, analogs & derivatives

\*1-Deoxynojirimycin: TU, therapeutic use
\*Enzyme Inhibitors: AE, adverse effects
\*Enzyme Inhibitors: TU, therapeutic use
\*Gaucher Disease: DT, drug therapy
Gaucher Disease: ME, metabolism

Glucosylceramidase: TU, therapeutic use

Glucosylceramides: ME, metabolism Hepatomegaly: DT, drug therapy Hepatomegaly: ET, etiology Hexosaminidases: BL, blood Splenomegaly: DT, drug therapy Splenomegaly: ET, etiology

Time

alpha-Glucosidases: AI, antagonists & inhibitors

CAS REGISTRY NO.: 19130-96-2 (1-Deoxynojirimycin); 72599-27-0

Cook 10/031767 Page 44

(n-butyldeoxynojirimycin)

CHEMICAL NAME: 0 (Enzyme Inhibitors); 0 (Glucosylceramides); EC 3.2.1.- (Hexosaminidases); EC 3.2.1.- (chitotriosidase); EC

3.2.1.20 (alpha-Glucosidases); EC 3.2.1.45

(Glucosylceramidase)

L99 ANSWER 6 OF 30 MEDLINE

ACCESSION NUMBER: 2000438898 MEDLINE

DOCUMENT NUMBER: 20421665 PubMed ID: 10968455

TITLE: Treatment of Gaucher's disease with OGT 918. Comment on: Lancet. 2000 Apr 29;355(9214):1481-5 COMMENT:

AUTHOR: Kranda M

SOURCE: LANCET, (2000 Aug 19) 356 (9230) 677.

Journal code: 2985213R. ISSN: 0140-6736.

ENGLAND: United Kingdom PUB. COUNTRY:

DOCUMENT TYPE: Commentary

Letter

LANGUAGE: English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH: 200009

ENTRY DATE: Entered STN: 20000928

Last Updated on STN: 20020208

Entered Medline: 20000920

CONTROLLED TERM: Check Tags: Human

\*1-Deoxynojirimycin: AD, administration & dosage

\*1-Deoxynojirimycin: AE, adverse effects 1-Deoxynojirimycin: AA, analogs & derivatives

Administration, Oral

\*Enzyme Inhibitors: AD, administration & dosage

\*Enzyme Inhibitors: AE, adverse effects \*Gaucher Disease: DT, drug therapy Gaucher Disease: ME, metabolism

Randomized Controlled Trials

Time

Treatment Outcome

alpha-Glucosidases: AI, antagonists & inhibitors

CAS REGISTRY NO .: 19130-96-2 (1-Deoxynojirimycin); 72599-27-0

(n-butyldeoxynojirimycin)

CHEMICAL NAME: 0 (Enzyme Inhibitors); EC 3.2.1.20 (alpha-Glucosidases)

L99 ANSWER 7 OF 30 MEDITNE

ACCESSION NUMBER: 2000514093 MEDLINE

DOCUMENT NUMBER: 20523197 PubMed ID: 11073045 TITLE: Risks of Gaucher's treatment.

AUTHOR: Barranger J A

SOURCE: LANCET, (2000 Oct 14) 356 (9238) 1353-4. Journal code: 2985213R. ISSN: 0140-6736.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: Letter LANGUAGE: English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH: 200011

ENTRY DATE: Entered STN: 20010322

> Last Updated on STN: 20010322 Entered Medline: 20001129

CONTROLLED TERM: Check Tags: Human

1-Deoxynojirimycin: AE, adverse effects

\*1-Deoxynojirimycin: AA, analogs & derivatives

1-Deoxynojirimycin: TU, therapeutic use

Anti-HIV Agents: AE, adverse effects \*Anti-HIV Agents: TU, therapeutic use Dose-Response Relationship, Drug \*Gaucher Disease: DT, drug therapy

Cook 10/031767

Risk Factors

CAS REGISTRY NO.: 19130-96-2 (1-Deoxynojirimycin); 72599-27-0

(n-butyldeoxynojirimycin)

CHEMICAL NAME: 0 (Anti-HIV Agents)

L99 ANSWER 8 OF 30 MEDLINE

2001144394 ACCESSION NUMBER: MEDLINE

DOCUMENT NUMBER: 20586230 PubMed ID: 11221677

TITLE: Imino sugar therapy for type 1 Gaucher disease. AUTHOR: Priestman D A; Platt F M; Dwek R A; Butters T D

SOURCE: GLYCOBIOLOGY, (2000 Nov) 10 (11) iv-vi.

Journal code: 9104124. ISSN: 0959-6658.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: Letter LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200102

ENTRY DATE: Entered STN: 20010404

> Last Updated on STN: 20010404 Entered Medline: 20010202

CONTROLLED TERM: Check Tags: Animal; Human

> 1-Deoxynojirimycin: AD, administration & dosage \*1-Deoxynojirimycin: AA, analogs & derivatives

1-Deoxynojirimycin: TU, therapeutic use Enzyme Inhibitors: AD, administration & dosage

\*Enzyme Inhibitors: TU, therapeutic use \*Gaucher Disease: DT, drug therapy Gaucher Disease: ME, metabolism

Glucosylceramidase: AD, administration & dosage

Glucosylceramidase: BL, blood Glycosphingolipids: ME, metabolism

\*alpha-Glucosidases: AI, antagonists & inhibitors

CAS REGISTRY NO.: 19130-96-2 (1-Deoxynojirimycin); 72599-27-0

(n-butyldeoxynojirimycin)

CHEMICAL NAME: 0 (Enzyme Inhibitors); 0 (Glycosphingolipids); EC 3.2.1.20

(alpha-Glucosidases); EC 3.2.1.45 (Glucosylceramidase)

L99 ANSWER 9 OF 30 MEDLINE

ACCESSION NUMBER: 87299749 MEDLINE

DOCUMENT NUMBER: 87299749 PubMed ID: 2956992

TITLE:

Human acid beta-glucosidase: use of inhibitors, alternative substrates and amphiphiles to investigate the properties of

the normal and Gaucher disease active sites.

AUTHOR: Osiecki-Newman K; Fabbro D; Legler G; Desnick R J;

Grabowski G A

CONTRACT NUMBER: K04 AM01351 (NIADDK)

R01 AM 26729 (NIADDK)

RR-71 (NCRR)

SOURCE: BIOCHIMICA ET BIOPHYSICA ACTA, (1987 Sep 2) 915 (1) 87-100.

Journal code: 0217513. ISSN: 0006-3002.

PUB. COUNTRY: Netherlands

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198710

ENTRY DATE: Entered STN: 19900305

> Last Updated on STN: 20000303 Entered Medline: 19871013

ABSTRACT:

Comparative studies with lipoidal inhibitors and alternative substrates were conducted to investigate the properties of the active site of human acid beta-glucosidase (D-glucosyl-N-acylsphingosine glucohydrolase, EC 3.2.1.45)

Page 46 Cook 10/031767

from normal placenta and spleens of Type 1 Ashkenazi Jewish Gaucher disease (AJGD) patients. With the normal enzyme, the inhibitory potencies of series of alkyl(Cn; n = 0-18) amines, alkyl beta-glucosides and alkyl-1-deoxynojirimycins were a biphasic function of increasing chain length: i.e., large decreases in Ki, app or IC50 were found only with n greater than 4 and limiting values were approached with n = 12-14. This biphasic function of alkyl chain length was observed in the presence or absence of detergents and/or negatively charged lipids. In the presence of Triton X-100 concentrations greater than the critical micellar concentration, the relative (to deoxynojirimycin) inhibitory potencies of the N-Cn-deoxynojirimycins (n greater than 4) were decreased about 3-5-fold, due to an energy requirement to extract the inhibitors from Triton X-100 micelles. The Ki,app or IC50 of N-hexylglucosylsphingosine was inversely related to the Triton X-100 concentration and was not affected by the presence of 'co-glucosidase'. The mutual exclusion of glucon, N-Cn-deoxynojirimycin and sphingosine derivatives from the normal enzyme suggested a shared region for binding in the active site. Increasing the fatty-acid acyl chain length of glucosyl ceramide from 1 to 24 carbons had minor effects on Km, app ( = Kis, app) (8-40 microM), but increased Vmax, app up to 13-fold. With the AJGD enzyme, the inhibitor and alternative substrate findings were similar to those with the normal enzyme, except that Kis,app(AJGD)/Kis,app(normal) = 4 to 11 for the Cn-glycons and sphingosine derivatives. These results indicated that (1) the Ki, app or Km, app values for amphiphilic inhibitors or substrates reflect a balance of binding energies for two hydrophobic subsites within the enzyme's active site and Triton X-100 micelles and (2) the abnormal properties of the AJGD enzyme result from an amino-acid alteration(s) within or near a hydrophilic region which is shared by the glycon-binding site and the two hydrophobic sites of the active site.

CONTROLLED TERM:

Check Tags: Female; Human; Support, Non-U.S. Gov't;

Support, U.S. Gov't, P.H.S.

1-Deoxynojirimycin

Amines: PD, pharmacology

Binding Sites

Binding, Competitive Ceramides: ME, metabolism

\*Gaucher Disease: EN, enzymology

Glucosamine: AA, analogs & derivatives

Glucosamine: PD, pharmacology \*Glucosidases: ME, metabolism Glucosides: PD, pharmacology

Kinetics Octoxynol

Placenta: EN, enzymology

Polyethylene Glycols: PD, pharmacology

Pregnancy

Sphingosine: AA, analogs & derivatives

Sphingosine: PD, pharmacology

Spleen: EN, enzymology

Structure-Activity Relationship

beta-Glucosidase: AI, antagonists & inhibitors

\*beta-Glucosidase: ME, metabolism

123-78-4 (Sphingosine); 19130-96-2 (1-Deoxynojirimycin); CAS REGISTRY NO.:

3416-24-8 (Glucosamine); 9002-93-1 (Octoxynol)

0 (Amines); 0 (Ceramides); 0 (Glucosides); 0 (Polyethylene CHEMICAL NAME:

Glycols); EC 3.2.1.- (Glucosidases); EC 3.2.1.21

(beta-Glucosidase)

MEDLINE L99 ANSWER 10 OF 30

ACCESSION NUMBER: 87004496 MEDLINE

DOCUMENT NUMBER: 87004496 PubMed ID: 2944742

TITLE: Human acid beta-glucosidase: affinity purification of the normal placental and Gaucher disease splenic enzymes on N-alkyl-deoxynojirimycin-sepharose.

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Page 47

AUTHOR:

Osiecki-Newman K M; Fabbro D; Dinur T; Boas S; Gatt S;

Legler G; Desnick R J; Grabowski G A

CONTRACT NUMBER:

AM 36729 (NIADDK)

K04-AM 01351 (NIADDK)

SOURCE:

ENZYME, (1986) 35 (3) 147-53.

Journal code: 1262265. ISSN: 0013-9432.

PUB. COUNTRY:

Switzerland

DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)

LANGUAGE:

English

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

198610

ENTRY DATE:

Entered STN: 19900302

Last Updated on STN: 20000303 Entered Medline: 19861030

## ABSTRACT:

Two sepharose-bound 1-deoxynojirimycin N-alkyl derivatives, N-(9-carboxynonyl)and N-(11-carboxyundecyl)-deoxynojirimycin, were used for the affinity purification of acid beta-glucosidase (beta-Glc) from normal and type-1 Ashkenazi Jewish Gaucher disease (AJGD) sources. The capacities of these nondegradable inhibitor supports were 0.5 and 0.75 mg of normal beta-Glc/ml of settled gel, respectively. The purified normal enzyme (14-18% yield) had a specific activity of 1.6 X 10(6) nmol/h/mg protein and was homogeneous as evidenced by a single protein species of Mr = 67,000 on sodium dodecylsulfate-polyacrylamide gel electrophoresis and reverse phase high-performance liquid chromatography (HPLC). Microsequencing demonstrated a single N terminus, and the sequence of the first 22 N-terminal amino acids was colinear with that predicted from the beta-Glc cDNA. Amino acid composition analyses of beta-Glc revealed a high content (35%) of hydrophobic amino acids. The N-decyl-deoxynojirimycin support facilitated the purification of the residual enzyme from type-1 AJGD spleen to about 7,500-fold in four steps with a yield of about 11%. These new affinity supports provided improved stability, capacity and/or specificity compared to other affinity or HPLC methods for purifying this lysosomal glycosidase.

CONTROLLED TERM:

Check Tags: Comparative Study; Female; Human; Support, Non-U.S. Gov't; Support, U.S. Gov't, P.H.S.

1-Deoxynojirimycin

Amino Acid Sequence

Chromatography, Affinity

Chromatography, High Pressure Liquid Electrophoresis, Polyacrylamide Gel \*Gaucher Disease: EN, enzymology

Glucosamine: AA, analogs & derivatives \*Glucosidases: IP, isolation & purification

Peptide Fragments

\*Placenta: EN, enzymology

Pregnancy

\*Spleen: EN, enzymology

\*beta-Glucosidase: IP, isolation & purification

CAS REGISTRY NO.: CHEMICAL NAME:

19130-96-2 (1-Deoxynojirimycin); 3416-24-8 (Glucosamine) O (Peptide Fragments); EC 3.2.1.- (Glucosidases); EC

3.2.1.21 (beta-Glucosidase)

L99 ANSWER 20 OF 30 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER:

2002169631 EMBASE

TITLE:

New prospects for the treatment of lysosomal storage

diseases.

AUTHOR:

Schiffmann R.; Brady R.O.

CORPORATE SOURCE:

Dr. R. Schiffmann, National Institutes of Health, Building 10, 9000 Rockville Pike, Bethesda, MD 20892-1260, United

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States. RS4e@nih.gov

SOURCE: Drugs, (2002) 62/5 (733-742).

Refs: 65

ISSN: 0012-6667 CODEN: DRUGAY

COUNTRY: New Zealand

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 008 Neurology and Neurosurgery

029 Clinical Biochemistry

030 Pharmacology

037 Drug Literature Index 038 Adverse Reactions Titles

LANGUAGE: English SUMMARY LANGUAGE: English

ABSTRACT:

Although individually rare, lysosomal storage disorders constitute a significant burden on society. To date, enzyme replacement therapy (ERT) has been the most successful therapeutic approach for lysosomal storage disorders. ERT reverses systemic manifestations of Gaucher disease but does not effectively treat the neurological complications. Recently, ERT produced a reduction of severe neuropathic pain, stabilisation of renal disease, and improved vascular function and structure in short-term, placebo-controlled trials in patients with Fabry's disease. Long-term studies are necessary to evaluate the full potential of ERT in this disease. In patients with Pompe disease, a fatal cardiac and skeletal muscle disorder, ERT improved cardiac function and structure, and increased overall muscle strength. It has already increased survival in a small number of affected infants. ERT also decreased liver and spleen size, joint mobility and quality of life in patients with mucopolysaccharidosis type I, but when the therapeutic protein is administered intravenously, it is unlikely to modify the neurological outcome in this or in other similar disorders. Bone marrow transplantation continues to be effective in Gaucher disease, in some forms of mucopolysaccharidosis and in mild forms of Krabbe disease, but it has high morbidity and mortality that limits its use in lysosomal storage disorders. Drugs that slow the rate of formation of accumulating glycolipids are being developed and one of them, OGT-918 (N-butyldeoxynojirimycin), is showing promise in patients with Gaucher disease. Gene therapy for lysosomal storage disorders holds promise as a replacement for the other therapies described here but requires much more development before clinical efficacy trials.

CONTROLLED TERM: Medical Descriptors:

\*lysosome storage disease: DT, drug therapy

\*lysosome storage disease: TH, therapy

enzyme replacement

Gaucher disease: DT, drug therapy

Gaucher disease: TH, therapy Fabry disease: DT, drug therapy

glycogen storage disease type 2: DT, drug therapy

mucopolysaccharidosis: DT, drug therapy

mucopolysaccharidosis: TH, therapy

neurological complication: CO, complication

drug effect

bone marrow transplantation

globoid cell leukodystrophy: TH, therapy

lipogenesis gene therapy

drug hypersensitivity: SI, side effect

human nonhuman clinical trial

review

Drug Descriptors:

enzyme: AE, adverse drug reaction

enzyme: CT, clinical trial

```
enzyme: AD, drug administration
                    enzyme: CB, drug combination
                    enzyme: DO, drug dose
                    enzyme: DT, drug therapy
                    enzyme: PK, pharmacokinetics
                    enzyme: IV, intravenous drug administration
                    n butyldeoxynojirimycin: CT, clinical trial
                    n butyldeoxynojirimycin: DO, drug dose
                    n butyldeoxynojirimycin: DT, drug therapy
                    bisphosphonic acid derivative: CT, clinical trial
                    bisphosphonic acid derivative: CB, drug combination
                    bisphosphonic acid derivative: DT, drug therapy
                    alendronic acid: CT, clinical trial
                    alendronic acid: CB, drug combination
                    alendronic acid: DT, drug therapy
                    alpha galactosidase: AE, adverse drug reaction
                    alpha galactosidase: CT, clinical trial
                    alpha galactosidase: AD, drug administration
                    alpha galactosidase: DO, drug dose
                    alpha galactosidase: DT, drug therapy
                    alpha galactosidase: PK, pharmacokinetics
                    alpha galactosidase: IV, intravenous drug administration
                    alpha glucosidase: DO, drug dose
                    alpha glucosidase: DT, drug therapy
                    levo iduronidase: AE, adverse drug reaction
                    levo iduronidase: CT, clinical trial
                    levo iduronidase: DO, drug dose
                    levo iduronidase: DT, drug therapy
                    ogt 918
                    (n butyldeoxynojirimycin) 72599-27-0; (alendronic
                    acid) 66376-36-1; (alpha galactosidase) 9023-01-2; (alpha
                    glucosidase) 9001-42-7
                    Oqt 918
L99 ANSWER 21 OF 30
                     EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.
                    2002245071 EMBASE
                    Low-dose N-butyldeoxynojirimycin (OGT 918) for type I
                    Gaucher disease.
                    Heitner R.; Elstein D.; Aerts J.; Van Weely S.; Zimran A.
                    D. Elstein, Gaucher Clinic, Shaare Zedek Medical Center,
                    P.O. Box 3235, Jerusalem 91031, Israel. gaucher@szmc.org.il
                    Blood Cells, Molecules, and Diseases, (2002) 28/2
                    (127-133).
                    Refs: 4
                    ISSN: 1079-9796 CODEN: BCMDFX
                    United States
                    Journal; Article
                    025
                            Hematology
                    029
                            Clinical Biochemistry
                    030
                            Pharmacology
                    037
                            Drug Literature Index
                    038
                            Adverse Reactions Titles
                    English
                    English
```

CAS REGISTRY NO.:

ACCESSION NUMBER:

CORPORATE SOURCE:

CHEMICAL NAME:

TITLE:

AUTHOR:

SOURCE:

COUNTRY:

LANGUAGE:

DOCUMENT TYPE:

SUMMARY LANGUAGE:

FILE SEGMENT:

ABSTRACT: The objective of this study was to evaluate the efficacy and safety of low-dose substrate balance therapy with OGT 918 for the treatment of adults with Gaucher disease. Eighteen patients with Gaucher disease from two centers were enrolled in an open-label 6-month study of OGT 918, 50 mg taken three times daily (TID), followed by an optional extended-use phase. Changes in liver and spleen volume at 6 and 12 months, as well as routine hematological and biochemical parameters on a monthly basis, were evaluated. During the extension, dosage was increased to 100 mg TID in patients in one center to improve the response. Seventeen

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patients completed 6 months; of 16 patients in the extension phase, 13 were evaluable at 12 months. Percentage changes in liver (-5.9%, P = 0.007) and spleen (-4.5%, P = 0.025) volumes and in chitotriosidase levels (-4.6%, P=0.039) at 6 months were commensurately lower than those reported previously in an open-label trial using 100 mg TID; hemoglobin and platelet counts were not boosted. At 12 months there were further mean decreases from baseline in liver volume (-6.2%, P = 0.037), spleen volume (-10.1%, P < 0.05), and chitotriosidase levels (-15.3%, P < 0.05) as well as mean changes of -2.27 and +14.7% in hemoglobin and platelet concentrations, respectively. There were no serious adverse effects throughout the 6-month study period; common side effects were diarrhea (94%) and weight loss (67%), comparable to the incidence in the original trial. We conclude that OGT 918 was safe and effective at 50 mg TID, but shows dose dependency in ameliorating parameters of Gaucher disease relative to the results noted in the seminal trial; there was no improvement in the rate of hematological response and no reduction in side effects. Results from the extension wherein some patients were dose increased suggest that 100 mg TID should be the preferred starting regimen for patients with symptomatic type I Gaucher disease. . COPYRGT. 2002 Elsevier Science (USA).

CONTROLLED TERM: Medical Descriptors:

\*Gaucher disease: DT, drug therapy

dose response drug efficacy drug safety liver weight treatment outcome spleen weight thrombocyte count diarrhea: SI, side effect weight reduction drug half life abdominal pain: SI, side effect flatulence: SI, side effect headache: SI, side effect tremor: SI, side effect influenza: SI, side effect disease classification human

male female

clinical article
clinical trial
phase 1 clinical trial

phase 2 clinical trial adult

article
priority journal
Drug Descriptors:

\*n butyldeoxynojirimycin: AE, adverse drug reaction

\*n butyldeoxynojirimycin: CT, clinical trial

\*n butyldeoxynojirimycin: DO, drug dose
\*n butyldeoxynojirimycin: DT, drug therapy
\*n butyldeoxynojirimycin: PK, pharmacokinetics

\*n butyldeoxynojirimycin: PD, pharmacology

\*n butyldeoxynojirimycin: PO, oral drug administration

enzyme: EC, endogenous compound

chitotriosidase: EC, endogenous compound

hemoglobin: EC, endogenous compound

unclassified drug

ogt 918

CAS REGISTRY NO.: (n butyldeoxynojirimycin) 72599-27-0;

(hemoglobin) 9008-02-0

CHEMICAL NAME: Ogt 918

L99 ANSWER 22 OF 30 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2002216463 EMBASE

TITLE: Novel treatment for neuronopathic lysosomal storage

diseases-cell therapy/gene therapy.

AUTHOR: Eto Y.; Ohashi T.

CORPORATE SOURCE: Y. Eto, Department of Pediatrics, Tokyo Jikei Univ. School

of Medicine, Institute for DNA Medicine, Nishishinbashi 3-25-8, Minato-ku, Tokyo, Japan. yosh@sepia.ocn.ne.jp

SOURCE: Current Molecular Medicine, (2002) 2/1 (83-89).

Refs: 96

ISSN: 1566-5240 CODEN: CMMUBP

COUNTRY: Netherlands
DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 008 Neurology and Neurosurgery

022 Human Genetics

029 Clinical Biochemistry 037 Drug Literature Index 038 Adverse Reactions Titles

039 Pharmacy

LANGUAGE: English SUMMARY LANGUAGE: English

ABSTRACT:

Most lysosomal storage diseases (LSD) exhibit neurological symptoms and there has been limited success in their treatment. Innovative treatments employing novel therapy or gene therapy may offer the prospect of improvement. Recent attempts to treat the neurological forms of LSD include neural stem cell therapy, mesenchymal stem cell therapy, hematopoietic stem cell therapy and gene therapy. Additional approaches have included substrate deprivation/chaperone therapy for the treatment of LSD. This article reviews these new technologies, discusses recent progress, and suggests their possible application.

CONTROLLED TERM: Medical Descriptors:

\*Gaucher disease: DT, drug therapy

\*Gaucher disease: SU, surgery \*Gaucher disease: TH, therapy

\*lysosome storage disease: DT, drug therapy

\*lysosome storage disease: SU, surgery
\*lysosome storage disease: TH, therapy

adoptive immunotherapy

gene therapy

neurologic disease: DT, drug therapy neurologic disease: SU, surgery

neurologic disease: TH, therapy

symptomatology
treatment outcome

bone marrow transplantation

enzyme replacement

viral gene delivery system

adenovirus vector retrovirus vector lentivirus vector

hematopoietic stem cell transplantation

enzyme therapy

Niemann Pick disease: DT, drug therapy

Hunter syndrome: DT, drug therapy

Maroteaux Lamy syndrome: DT, drug therapy

chronic diarrhea: SI, side effect

human nonhuman mouse

clinical trial

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animal model controlled study

article

Drug Descriptors:

chaperone: EC, endogenous compound carbamazepine: DT, drug therapy normephenytoin: DT, drug therapy cyclosporin: DT, drug therapy

somatomedin B receptor: EC, endogenous compound alpha galactosidase: EC, endogenous compound

galactosylceramidase: DT, drug therapy galactosylceramidase: EC, endogenous compound

galactosylceramidase: PR, pharmaceutics

galactosylceramidase: IV, intravenous drug administration

n butyldeoxynojirimycin: AE, adverse drug reaction

n butyldeoxynojirimycin: CT, clinical trial n butyldeoxynojirimycin: DT, drug therapy n butyldeoxynojirimycin: PD, pharmacology

pyrrolidine derivative

enzyme inhibitor: DT, drug therapy enzyme inhibitor: PD, pharmacology

ganglioside GM2: EC, endogenous compound beta glucuronidase: DT, drug therapy beta glucuronidase: PR, pharmaceutics

beta glucuronidase: IV, intravenous drug administration

complementary DNA

(carbamazepine) 298-46-4, 8047-84-5; (normephenytoin) CAS REGISTRY NO.:

631-07-2; (cyclosporin) 79217-60-0; (alpha galactosidase)

9023-01-2; (galactosylceramidase) 9027-89-8; (n butyldeoxynojirimycin) 72599-27-0; (ganglioside GM2) 19600-01-2; (beta glucuronidase) 9001-45-0

L99 ANSWER 23 OF 30 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER:

2001087279 EMBASE

TITLE:

Substrate reduction therapy for glycosphingolipid storage

disorders.

AUTHOR:

Lachmann R.H.; Platt F.M.

CORPORATE SOURCE:

R.H. Lachmann, Department of Medicine, University of

Cambridge, Addenbrooke's Hospitals, Hills Road, Cambridge

CB2 2QQ, United Kingdom. rh120@cam.ac.uk

SOURCE:

Expert Opinion on Investigational Drugs, (2001) 10/3

(455-466). Refs: 59

ISSN: 1354-3784 CODEN: EOIDER

COUNTRY:

United Kingdom

DOCUMENT TYPE:

Journal; General Review

FILE SEGMENT:

Clinical Biochemistry 029

030 Pharmacology

Drug Literature Index 037 Adverse Reactions Titles 038

LANGUAGE:

English SUMMARY LANGUAGE: English

ABSTRACT:

Substrate reduction therapy is a novel approach to treating glycosphingolipid (GSL) lysosomal storage disorders. These diseases are caused by mutations in the genes coding for enzymes involved in GSL catabolism and are characterised by the accumulation of GSL substrates within the lysosomes of cells. The aim of substrate reduction therapy is to inhibit the rate of synthesis of GSLs to levels where the residual activity of the mutant catabolic enzyme is sufficient to prevent pathological storage. In this review we discuss the development of N-butyldeoxynojirimycin (NB-DNJ), an imino sugar that inhibits the ceramide-specific glucosyltransferase which catalyses the first committed step of GSL synthesis. This agent has been shown to slow accumulation of stored

glycolipid in an in vitro model of Gaucher's disease and in knockout mouse models of Tay-Sachs and Sandhoff diseases. Furthermore, administration of NB-DNJ to Sandhoff mice delays the onset of neurological disease and also slows its progression. We discuss safety and efficacy data from the clinical trial of substrate reduction with NB-DNJ which has been undertaken in patients with Type 1 Gaucher's disease. This trial provides a proof-of-principle for the use of this approach in a wide range of GSL lysosomal storage diseases.

CONTROLLED TERM:

Medical Descriptors: \*Fabry disease: DT, drug therapy biosynthesis enzyme inhibition drug mechanism in vitro study Gaucher disease: DT, drug therapy knockout mouse Tay Sachs disease: DT, drug therapy Sandhoff disease: DT, drug therapy drug structure drug blood level drug safety gastrointestinal tract target organ diarrhea: SI, side effect flatulence: SI, side effect nausea: SI, side effect weight reduction paresthesia: SI, side effect drug efficacy hepatosplenomegaly human nonhuman mouse clinical trial animal experiment animal model controlled study animal tissue animal cell review Drug Descriptors: \*glycosphingolipid: EC, endogenous compound \*n butyldeoxynojirimycin: AE, adverse drug reaction \*n butyldeoxynojirimycin: CT, clinical trial \*n butyldeoxynojirimycin: AN, drug analysis \*n butyldeoxynojirimycin: CR, drug concentration \*n butyldeoxynojirimycin: DO, drug dose \*n butyldeoxynojirimycin: DT, drug therapy \*n butyldeoxynojirimycin: PD, pharmacology \*n butyldeoxynojirimycin: PO, oral drug administration ceramide glucosyltransferase: EC, endogenous compound glycolipid: EC, endogenous compound alglucerase: EC, endogenous compound sphinganine: EC, endogenous compound ceramide: EC, endogenous compound galactosylceramide: EC, endogenous compound sphingomyelin: EC, endogenous compound lactosylceramide: EC, endogenous compound palmitoyl coenzyme A: EC, endogenous compound glucosyltransferase: EC, endogenous compound uridine diphosphate: EC, endogenous compound glucose: EC, endogenous compound globotriaosylceramide: EC, endogenous compound

ganglioside GM2: EC, endogenous compound ganglioside GM1: EC, endogenous compound glucosylceramidase: EC, endogenous compound alpha galactosidase: EC, endogenous compound

beta n acetylhexosaminidase A: EC, endogenous compound

ogt 918

CAS REGISTRY NO.: (n butyldeoxynojirimycin) 72599-27-0; (ceramide

glucosyltransferase) 37237-44-8; (sphinganine) 764-22-7;

(galactosylceramide) 85305-88-0; (sphingomyelin) 85187-10-6; (lactosylceramide) 4682-48-8; (palmitoyl coenzyme A) 1763-10-6; (glucosyltransferase) 9031-48-5; (uridine diphosphate) 58-98-0; (glucose) 50-99-7,

84778-64-3; (globotriaosylceramide) 71965-57-6;

(ganglioside GM2) 19600-01-2; (ganglioside GM1) 37758-47-7;

(glucosylceramidase) 37228-64-1; (alpha galactosidase)

9023-01-2

CHEMICAL NAME:

Ogt 918

L99 ANSWER 24 OF 30 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2000419619 EMBASE

TITLE: Niemann-Pick type C: A disorder of cellular cholesterol

trafficking.

AUTHOR: Ory D.S.

CORPORATE SOURCE: D.S. Ory, Department of Internal Medicine, Washington

University, School of Medicine, 660 S Euclid Avenue, St Louis, MO 63110-1093, United States. dory@imgate.wustl.edu Biochimica et Biophysica Acta - Molecular and Cell Biology

SOURCE: Biochimica et Biophysica Acta - Molecular an of Lipids, (15 Dec 2000) 1529/1-3 (331-339).

Refs: 57

ISSN: 1388-1981 CODEN: BBMLFG

PUBLISHER IDENT.: S 1388-1981(00)00158-X

COUNTRY:

FILE SEGMENT:

Netherlands

DOCUMENT TYPE:

Journal; General Review 022 Human Genetics

029 Clinical Biochemistry 037 Drug Literature Index

OO5 General Pathology and Pathological Anatomy

008 Neurology and Neurosurgery

LANGUAGE: English

CONTROLLED TERM:

Medical Descriptors:

\*Niemann Pick disease: ET, etiology

\*cholesterol transport

clinical feature cell function homeostasis

protein structure, function and variability autosomal recessive disorder: ET, etiology

phenotype

degenerative disease: ET, etiology
Gaucher disease: DT, drug therapy

niemann pick disease type c: ET, etiology

human nonhuman mouse

animal model clinical trial

review

priority journal
Drug Descriptors:

\*cholesterol: EC, endogenous compound

sterol: EC, endogenous compound glycolipid: EC, endogenous compound

glycosphingolipid: EC, endogenous compound n butyldeoxynojirimycin: PD, pharmacology n butyldeoxynojirimycin: DT, drug therapy n butyldeoxynojirimycin: CT, clinical trial (cholesterol) 57-88-5; (n butyldeoxynojirimycin)

72599-27-0

CAS REGISTRY NO.:

L99 ANSWER 25 OF 30 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

2001403483 EMBASE ACCESSION NUMBER:

TITLE: Remaining problems in the management of patients with

Gaucher disease.

AUTHOR: Erikson A.

CORPORATE SOURCE: A. Erikson, Department of Pediatrics, Umea University

> Hospital, 901 85 Umea, Sweden. anders.erikson.us@vll.se Journal of Inherited Metabolic Disease, (2001) 24/SUPPL. 2

SOURCE: (122-126).

> Refs: 28 ISSN: 0141-8955 CODEN: JIMDDP

Netherlands COUNTRY: DOCUMENT TYPE: Journal; Article

Internal Medicine FILE SEGMENT: 006

Clinical Biochemistry 029

> 030 Pharmacology

036 Health Policy, Economics and Management

037 Drug Literature Index 038 Adverse Reactions Titles

LANGUAGE: English SUMMARY LANGUAGE: English

ABSTRACT:

The history of treatment of Gaucher disease started with splenectomy and continued with bone marrow transplantation, before the recent introduction of enzyme replacement therapy. Although the latter has revolutionized the prognosis of patients, many questions remain to be answered and clinical management problems resolved. These include how to monitor enzyme replacement to determine the optimal dosage, how to treat mild disease, whether intermittent treatment is an option, and the causes of the neurological signs and how to treat them. The pulmonary hypertension problem has also not been resolved, and we need to determine how to treat and monitor bone disease. In addition, the future role of substrate deprivation needs to be determined, and further research is required before gene therapy becomes a potential clinical option. The high cost of enzyme replacement treatment for Gaucher disease remains an important issue.

CONTROLLED TERM:

Medical Descriptors:

\*Gaucher disease: DT, drug therapy

\*Gaucher disease: SU, surgery \*Gaucher disease: TH, therapy

history splenectomy

bone marrow transplantation

enzyme replacement

prognosis

patient monitoring dose response disease severity

neurologic disease: DT, drug therapy

pulmonary hypertension

bone disease: DT, drug therapy

enzyme substrate gene therapy drug mechanism

diarrhea: SI, side effect

drug cost

human

controlled study

article

Drug Descriptors:
enzyme: DO, drug dose
enzyme: DT, drug therapy
enzyme: PE, pharmacoeconomics
enzyme: PD, pharmacology
alglucerase: DT, drug therapy

alglucerase: DT, drug therapy alglucerase: PD, pharmacology

n butyldeoxynojirimycin: AE, adverse drug reaction

n butyldeoxynojirimycin: DT, drug therapy n butyldeoxynojirimycin: PD, pharmacology

n butyldeoxynojirimycin: PO, oral drug administration

calcium: DT, drug therapy
vitamin D: DT, drug therapy

bisphosphonic acid derivative: DT, drug therapy

ogt 918

CAS REGISTRY NO.: (n butyldeoxynojirimycin) 72599-27-0; (calcium)

7440-70-2

CHEMICAL NAME: Ogt 918

L99 ANSWER 26 OF 30 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2001054594 EMBASE

TITLE: Stemming the tide: Glycosphingolipid synthesis inhibitors

as therapy for storage diseases.

AUTHOR: Tifft C.J.; Proia R.I.

CORPORATE SOURCE: R.L. Proia, National Institutes of Health, Gen. of Dev. and

Disease Branch, National Institutes of Diabetes, Building

10, Bethesda, MD 20892, United States

SOURCE: Glycobiology, (2000) 10/12 (1249-1258).

Refs: 63

ISSN: 0959-6658 CODEN: GLYCE3

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 029 Clinical Biochemistry

037 Drug Literature Index
038 Adverse Reactions Titles

LANGUAGE: English SUMMARY LANGUAGE: English

ABSTRACT:

Glycosphingolipids (GSLs) are plasma membrane components of every eukaryotic cell. They are composed of a hydrophobic ceramide moiety linked to a glycan chain of variable length and structure. Once thought to be relatively inert, GSLs have now been implicated in a variety of biological processes. Recent studies of animals rendered genetically deficient in various classes of GSLs have demonstrated that these molecules are important for embryonic differentiation and development as well as central nervous system function. A family of extremely severe disease is caused by inherited defects in the lysosomal degradation pathway of GSLs. In many of these disorders GSLs accumulate in cells, particularly neurons, causing neurodegeneration and a shortened life span. No effective treatment exists for most of these diseases and little is understood about the mechanisms of pathogenesis. This review will discuss the development of a new approach to the treatment of GSL storage disorders that targets the major synthesis pathway of GSLs to stem their cellular accumulation.

CONTROLLED TERM: Medical Descriptors:

\*storage disease: DT, drug therapy

cell membrane eukaryotic cell chemical composition hydrophobicity

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chemical structure
genetics
embryo development
central nervous system
disease severity
inheritance
lysosome storage disease
nerve degeneration: ET, etiology
lifespan
pathogenesis
biosynthesis
drug structure
diarrhea: SI, side effect
neuropathy: SI, side effect
weight reduction
drug metabolism
Tay Sachs disease: DT, drug therapy
  Gaucher disease: DT, drug therapy
Fabry disease: DT, drug therapy
Sandhoff disease: DT, drug therapy
GM1 gangliosidosis: DT, drug therapy
Niemann Pick disease: DT, drug therapy
human
nonhuman
mouse
clinical trial
animal experiment
animal model
controlled study
review
priority journal
Drug Descriptors:
*glycosphingolipid synthesis inhibitor: AE, adverse drug
*glycosphingolipid synthesis inhibitor: CT, clinical trial
*glycosphingolipid synthesis inhibitor: AN, drug analysis
*glycosphingolipid synthesis inhibitor: DT, drug therapy
*glycosphingolipid synthesis inhibitor: PK,
pharmacokinetics
*glycosphingolipid synthesis inhibitor: PD, pharmacology
*glycosphingolipid synthesis inhibitor: PO, oral drug
administration
*blocking agent: AE, adverse drug reaction
*blocking agent: CT, clinical trial
*blocking agent: AN, drug analysis
*blocking agent: PK, pharmacokinetics
*blocking agent: PD, pharmacology
*blocking agent: PO, oral drug administration
*glycosphingolipid: EC, endogenous compound
ceramide: EC, endogenous compound
glycan: EC, endogenous compound
n butyldeoxygalactonojirimycin: AE, adverse drug reaction
n butyldeoxygalactonojirimycin: AN, drug analysis
n butyldeoxygalactonojirimycin: DT, drug therapy
\ n \ butyldeoxygalactonojirimycin: \ PK, \ pharmacokinetics
n butyldeoxygalactonojirimycin: PD, pharmacology
n butyldeoxynojirimycin: AE, adverse drug reaction
n butyldeoxynojirimycin: CT, clinical trial
n butyldeoxynojirimycin: AN, drug analysis
n butyldeoxynojirimycin: DT, drug therapy
n butyldeoxynojirimycin: PK, pharmacokinetics
n butyldeoxynojirimycin: PD, pharmacology
n butyldeoxynojirimycin: PO, oral drug administration
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Cook 10/031767 Page 58

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dextro threo 1 (3',4' ethylenedioxy)phenyl 2 palmitoylamino
3 pyrrolidino 1 propanol: AE, adverse drug reaction
dextro threo 1 (3',4' ethylenedioxy)phenyl 2 palmitoylamino
3 pyrrolidino 1 propanol: CT, clinical trial
dextro threo 1 (3',4' ethylenedioxy)phenyl 2 palmitoylamino
3 pyrrolidino 1 propanol: AN, drug analysis
dextro threo 1 (3',4' ethylenedioxy)phenyl 2 palmitoylamino
3 pyrrolidino 1 propanol: DT, drug therapy
dextro threo 1 (3',4' ethylenedioxy)phenyl 2 palmitoylamino
3 pyrrolidino 1 propanol: PK, pharmacokinetics
dextro threo 1 (3',4' ethylenedioxy)phenyl 2 palmitoylamino
3 pyrrolidino 1 propanol: PD, pharmacology
dextro 4' hydroxy 1 phenyl 2 palmitoylamino 2 pyrrolidino 1
propanol: AE, adverse drug reaction
dextro 4' hydroxy 1 phenyl 2 palmitoylamino 2 pyrrolidino 1
propanol: CT, clinical trial
dextro 4' hydroxy 1 phenyl 2 palmitoylamino 2 pyrrolidino 1
propanol: AN, drug analysis
dextro 4' hydroxy 1 phenyl 2 palmitoylamino 2 pyrrolidino 1
propanol: DT, drug therapy
dextro 4' hydroxy 1 phenyl 2 palmitoylamino 2 pyrrolidino 1
propanol: PK, pharmacokinetics
dextro 4' hydroxy 1 phenyl 2 palmitoylamino 2 pyrrolidino 1 -
propanol: PD, pharmacology
dextro threo 1 phenyl 2 decanoylamino 3 morpholino 1
propanol: AE, adverse drug reaction
dextro threo 1 phenyl 2 decanoylamino 3 morpholino 1
propanol: CT, clinical trial
dextro threo 1 phenyl 2 decanoylamino 3 morpholino 1
propanol: AN, drug analysis
dextro threo 1 phenyl 2 decanoylamino 3 morpholino 1
propanol: DT, drug therapy
dextro threo 1 phenyl 2 decanoylamino 3 morpholino 1
propanol: PK, pharmacokinetics
dextro threo 1 phenyl 2 decanoylamino 3 morpholino 1
propanol: PD, pharmacology
propanol
beta n acetylhexosaminidase A: EC, endogenous compound
beta n acetylhexosaminidase B: EC, endogenous compound
beta glucosidase: EC, endogenous compound
beta galactosidase: EC, endogenous compound
ganglioside GM2: EC, endogenous compound
ganglioside GA2: EC, endogenous compound
ganglioside: EC, endogenous compound
oligosaccharide: EC, endogenous compound
galactosylceramide: EC, endogenous compound
globotriaosylceramide: EC, endogenous compound
galabiosylceramide: EC, endogenous compound
ceramide derivative: EC, endogenous compound
keratan sulfate: EC, endogenous compound
sphingomyelin: EC, endogenous compound
cholesterol: EC, endogenous compound
ganglioside GM3: EC, endogenous compound
lactosylceramide: EC, endogenous compound
sphingosine: EC, endogenous compound
sulfatide: EC, endogenous compound
unindexed drug
unclassified drug
(n butyldeoxynojirimycin) 72599-27-0; (propanol)
62309-51-7, 71-23-8; (beta glucosidase) 51683-43-3,
9001-22-3; (ganglioside GM2) 19600-01-2;
(galactosylceramide) 85305-88-0; (globotriaosylceramide)
71965-57-6; (keratan sulfate) 69992-87-6, 9056-36-4;
```

CAS REGISTRY NO.:

Cook 10/031767

Page 59

(sphingomyelin) 85187-10-6; (cholesterol) 57-88-5;

(ganglioside GM3) 54827-14-4; (lactosylceramide) 4682-48-8;

(sphingosine) 123-78-4

L99 ANSWER 27 OF 30 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2001012300 EMBASE

TITLE: Treating glucosphingolipid disorders by chemotherapy: Use

of approved drugs and over-the-counter remedies.

AUTHOR: Radin N.S.

CORPORATE SOURCE: N.S. Radin, 350 Sharon Park Dr., Menlo Park, CA 94025,

United States. Glyconorm@aol.com

SOURCE: Journal of Inherited Metabolic Disease, (2000) 23/8

(767-777). Refs: 40

ISSN: 0141-8955 CODEN: JIMDDP

COUNTRY: Netherlands

DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 006 Internal Medicine

029 Clinical Biochemistry 037 Drug Literature Index 038 Adverse Reactions Titles

LANGUAGE: English SUMMARY LANGUAGE: English

ABSTRACT:

The accumulation of a glucosphingolipid (GSL) in individuals lacking an adequate level of hydrolase activity could be minimized by chemotherapeutic measures that slow the formation of the GSL and stimulate the defective hydrolase. By achieving a balance in the rates of formation and breakdown, one should be able to alleviate the symptoms of excess storage and achieve a satisfactory accommodation. While several drugs seem to be specifically suitable for this purpose, only one of these has been approved for human use. However, less effective drugs and over-the-counter substances are available for human use and may prove satisfactory for a few years until better ones are made available. The proposed materials and the evidence behind the recommendations are presented in this paper.

CONTROLLED TERM: Medical Descriptors:

\*lipidosis: DT, drug therapy
\*lipidosis: FT, etiology

\*lipidosis: ET, etiology
Gaucher disease: DT, dru

Gaucher disease: DT, drug therapy Fabry disease: DT, drug therapy

Fabry disease: ET, etiology

Tay Sachs disease: DT, drug therapy Tay Sachs disease: ET, etiology Sandhoff disease: DT, drug therapy Sandhoff disease: ET, etiology fucosidosis: DT, drug therapy fucosidosis: ET, etiology

GM1 gangliosidosis: DT, drug therapy GM1 gangliosidosis: ET, etiology

lipid storage

enzyme deficiency: ET, etiology

pathogenesis
drug targeting
drug approval
enzyme activation
enzyme activity
drug effect

substitution therapy diet supplementation

low fat diet

treatment planning

diarrhea: SI, side effect

Cook 10/031767 Page 60

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peripheral neuropathy: SI, side effect
evidence based medicine
human
nonhuman
mouse
animal experiment
animal model
controlled study
article
Drug Descriptors:
*non prescription drug: DT, drug therapy
*glycosphingolipid: EC, endogenous compound
hydrolase: EC, endogenous compound hemoglobin: EC, endogenous compound
glucosylceramide: EC, endogenous compound
ceramide: EC, endogenous compound
lactosylceramide: EC, endogenous compound
globotriaosylceramide: EC, endogenous compound
uridine diphosphate glucose: EC, endogenous compound ceramide glucosyltransferase: EC, endogenous compound
alpha galactosidase: EC, endogenous compound
beta galactosidase: EC, endogenous compound
ceramide glucosyltransferase inhibitor: DT, drug therapy
ceramide glucosyltransferase inhibitor: PD, pharmacology
alglucerase: DT, drug therapy
alglucerase: PD, pharmacology
glucosidase: DT, drug therapy
glucosidase: PD, pharmacology
cycloserine: DT, drug therapy
cycloserine: PD, pharmacology
n butyldeoxynojirimycin: AE, adverse drug reaction
n butyldeoxynojirimycin: DO, drug dose
n butyldeoxynojirimycin: DT, drug therapy
n butyldeoxynojirimycin: PD, pharmacology
n butyldeoxynojirimycin: PO, oral drug administration
2 decanoylamino 3 morpholino 1 phenyl 1 propanol: DT, drug
therapy
2 decanoylamino 3 morpholino 1 phenyl 1 propanol: BD,
buccal drug administration
2 decanoylamino 3 morpholino 1 phenyl 1 propanol: IP,
intraperitoneal drug administration
tamoxifen: AE, adverse drug reaction
tamoxifen: DT, drug therapy
tamoxifen: PD, pharmacology
verapamil: DT, drug therapy
verapamil: PD, pharmacology
doxorubicin: DT, drug therapy
doxorubicin: PD, pharmacology
mifepristone: DT, drug therapy
mifepristone: PD, pharmacology
retinol: CM, drug comparison
retinol: DT, drug therapy
retinol: PD, pharmacology
antioxidant: DT, drug therapy
antioxidant: PD, pharmacology
retinoic acid derivative: DT, drug therapy
retinoic acid derivative: PD, pharmacology
fenretinide: CM, drug comparison
fenretinide: DT, drug therapy
fenretinide: PD, pharmacology
glucose: EC, endogenous compound
acarbose: DT, drug therapy
acarbose: PD, pharmacology
```

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glucocorticoid: PD, pharmacology
```

unindexed drug

CAS REGISTRY NO.: (hydrolase) 9027-41-2; (hemoglobin) 9008-02-0;

(lactosylceramide) 4682-48-8; (globotriaosylceramide) 71965-57-6; (uridine diphosphate glucose) 133-89-1; (ceramide glucosyltransferase) 37237-44-8; (alpha galactosidase) 9023-01-2; (glucosidase) 9033-06-1;

(cycloserine) 339-72-0, 68-39-3, 68-41-7; (n

butyldeoxynojirimycin) 72599-27-0; (2

decanoylamino 3 morpholino 1 phenyl 1 propanol) 109836-82-0, 73257-80-4; (tamoxifen) 10540-29-1;

(verapamil) 152-11-4, 52-53-9; (doxorubicin) 23214-92-8, 25316-40-9; (mifepristone) 84371-65-3; (retinol) 68-26-8, 82445-97-4; (fenretinide) 65646-68-6, 75686-07-6; (glucose)

50-99-7, 84778-64-3; (acarbose) 56180-94-0

CHEMICAL NAME: Ru 486; Adriamycin; Ceredase

L99 ANSWER 28 OF 30 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2000196634 EMBASE

TIME D

TITLE: Orphan drugs and orphan diseases.

AUTHOR: Campos-Castello J.; Ponsot G.; Feillet F.; Vidailhet M.;

Maire I.

CORPORATE SOURCE: Dr. J. Campos-Castello, University Hospital San Carlos,

Servicio de Neuropediatria, Martin Lagos s/n, 28040 Madrid,

Spain. jcampos@hcsc.insalud.es

SOURCE: European Journal of Paediatric Neurology, (2000) 4/3

(141-149). Refs: 25

ISSN: 1090-3798 CODEN: EJPNFO

COUNTRY:

United Kingdom
Journal; Article

DOCUMENT TYPE: C

007 Pediatrics and Pediatric Surgery

008 Neurology and Neurosurgery

037 Drug Literature Index

LANGUAGE: English

CONTROLLED TERM: Medical Descriptors:

\*urea cycle

\*enzyme deficiency: CN, congenital disorder

\*enzyme deficiency: DT, drug therapy \*enzyme deficiency: TH, therapy

\*lysosome storage disease: DT, drug therapy

\*lysosome storage disease: SU, surgery \*lysosome storage disease: TH, therapy

nitrogen balance protein restriction

pregnancy

bone marrow transplantation

gene therapy
drug manufacture

Gaucher disease: CN, congenital disorder

Gaucher disease: DT, drug therapy Fabry disease: CN, congenital disorder

Niemann Pick disease: CN, congenital disorder

inborn error of metabolism: CN, congenital disorder glycogen storage disease type 2: CN, congenital disorder

Hurler syndrome: CN, congenital disorder

human nonhuman mouse article

priority journal Drug Descriptors:

\*orphan drug

\*ornithine carbamoyltransferase: EC, endogenous compound \*argininosuccinate synthase: EC, endogenous compound

\*argininosuccinate lyase: EC, endogenous compound

\*benzoic acid: DT, drug therapy \*mercaptamine: DT, drug therapy

nitrogen glycine glutamine

arylbutyric acid derivative

phenylacetic acid: DT, drug therapy arginase: EC, endogenous compound

glutamate acetyltransferase: EC, endogenous compound

somatomedin B receptor

alglucerase: DT, drug therapy

alpha galactosidase: EC, endogenous compound

sphingomyelin phosphodiesterase: EC, endogenous compound

levo iduronidase: EC, endogenous compound

glucan 1,4 alpha glucosidase: EC, endogenous compound

n butyldeoxynojirimycin uridine diphosphate glucose

CAS REGISTRY NO.:

(ornithine carbamoyltransferase) 9001-69-8;

(argininosuccinate synthase) 9023-58-9; (argininosuccinate lyase) 9027-34-3; (benzoic acid) 532-32-1, 582-25-2,

65-85-0, 766-76-7; (mercaptamine) 156-57-0, 60-23-1; (urea)

57-13-6; (nitrogen) 7727-37-9; (glycine) 56-40-6, 6000-43-7, 6000-44-8; (glutamine) 56-85-9, 6899-04-3; (phenylacetic acid) 103-82-2; (arginase) 9000-96-8; (glutamate acetyltransferase) 37257-14-0; (alpha

galactosidase) 9023-01-2; (sphingomyelin phosphodiesterase) 9031-54-3; (glucan 1,4 alpha glucosidase) 9032-08-0; (n

butyldeoxynojirimycin) 72599-27-0; (uridine

diphosphate glucose) 133-89-1

L99 ANSWER 29 OF 30 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 1998345389 EMBASE

TITLE: New therapeutic prospects for the glycosphingolipid

lysosomal storage diseases.

Platt F.M.; Butters T.D. AUTHOR:

Dr. F.M. Platt, Glycobiology Institute, Department of CORPORATE SOURCE:

Biochemistry, University of Oxford, South Parks Road,

Oxford OX1 3QU, United Kingdom. Fran@oxglua.glycob.ox.ac.uk

SOURCE: Biochemical Pharmacology, (1998) 56/4 (421-430).

Refs: 50

ISSN: 0006-2952 CODEN: BCPCA6

S 0006-2952(98)00115-4

PUBLISHER IDENT.: COUNTRY:

United States

DOCUMENT TYPE:

Journal; General Review

FILE SEGMENT:

029 Clinical Biochemistry

030 Pharmacology

037 Drug Literature Index

005 General Pathology and Pathological Anatomy

LANGUAGE:

English

SUMMARY LANGUAGE:

English

The glycosphingolipid (GSL) lysosomal storage diseases result from mutations in the genes that encode the enzymes required for glycosphingolipid catabolism within lysosomes. They are relatively rare diseases, but are frequently severe in terms of their pathology. Many involve progressive neurodegeneration, and in the most severe forms result in death in early infancy. The therapeutic options for treating these diseases are limited, and for the majority of these disorders there are currently no therapies available. To date, most research

has focused on correcting the genetic lesion by gene therapy or by augmenting the enzyme activity deficient in these patients by introducing fully functional enzyme. This can be achieved by bone marrow transplantation or intravenous infusion of purified or recombinant enzyme (enzyme replacement). Gene therapy and enzyme replacement therapy are disease specific, and pharmacological approaches for the treatment of these disorders have not been fully explored. In this commentary, the problems associated with disease therapy are discussed, and a pharmacological agent (N-butyldeoxynojirimycin) is presented for the potential generic treatment of this family of disorders. Successful prevention of glycosphingolipid storage in a mouse model of Tay-Sachs disease suggests that this strategy merits clinical evaluation. BIOCHEM PHARMACOL 56;4:421-430, 1998. (C) 1998 Elsevier Science Inc.

CONTROLLED TERM:

Medical Descriptors:

\*lysosome storage disease: TH, therapy \*lysosome storage disease: ET, etiology \*lysosome storage disease: DT, drug therapy

\*gaucher disease: DT, drug therapy \*gaucher disease: DI, diagnosis

\*tay sachs disease: DT, drug therapy \*tay sachs disease: DI, diagnosis

gene mutation drug metabolism gene therapy

enzyme replacement

bone marrow transplantation

enzyme deficiency

genotype enzyme assay in vitro study

model macrophage human nonhuman mouse animal cell

review

priority journal Drug Descriptors:

\*glycosphingolipid: EC, endogenous compound beta galactosidase: EC, endogenous compound alpha galactosidase: EC, endogenous compound

beta n acetylhexosaminidase: EC, endogenous compound

alpha levo fucosidase: EC, endogenous compound

arylsulfatase: EC, endogenous compound enzyme inhibitor: DT, drug therapy glucosidase: EC, endogenous compound

aminosugar: DT, drug therapy

n butyldeoxynojirimycin: DT, drug therapy (alpha galactosidase) 9023-01-2; (beta n

acetylhexosaminidase) 37211-57-7, 9027-52-5; (alpha levo

fucosidase) 9037-65-4; (arylsulfatase) 9016-17-5; (glucosidase) 9033-06-1; (n butyldeoxynojirimycin)

72599-27-0

WPIDS (C) 2002 THOMSON DERWENT L99 ANSWER 30 OF 30

ACCESSION NUMBER: 2002-171538 [22] WPIDS

DOC. NO. CPI:

C2002-052997

TITLE:

Use of a combination of enzyme replacement therapy, gene therapy and small molecule therapy for treating lysosomal

storage disease e.g. Fabry disease.

DERWENT CLASS:

CAS REGISTRY NO.:

B03 D16 INVENTOR(S): CHENG, S H; MEEKER, D Cook 10/031767 Page 64

(GENZ) GENZYME CORP; (CHEN-I) CHENG S H; (MEEK-I) MEEKER PATENT ASSIGNEE(S):

COUNTRY COUNT: 96

PATENT INFORMATION:

PATENT NO KIND DATE WEEK LA PG MAIN IPC

WO 2001097829 A2 20011227 (200222)\* EN 45 A61K038-00

RW: AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW MZ

NL OA PT SD SE SL SZ TR TZ UG ZW

W: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR

KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ PL PT RO RU

SD SE SG SI SK SL TJ TM TR TT TZ UA UG UZ VN YU ZA ZW

SD SE SG SI SR SE IS AU 2001069923 A 20020102 (200230)

A61K038-00

A61M031-00

#### APPLICATION DETAILS:

PATENT NO KIN	id 	APPLICATION	DATE
WO 2001097829 A AU 2001069923 A US 2002095135 A	<u></u>	WO 2001-US19579 AU 2001-69923 US 2000-212377P US 2001-884526	20010619 20010619 20000619 20010619

#### FILING DETAILS:

PATENT NO KIND PATENT NO AU 2001069923 A Based on WO 200197829

PRIORITY APPLN. INFO: US 2000-212377P 20000619; US 2001-884526

20010619

INT. PATENT CLASSIF.:

MAIN: A61K038-00; A61M031-00

BASIC ABSTRACT:

WO 200197829 A UPAB: 20020409

NOVELTY - Treatment of Fabry disease involves administering a combination therapy selected from at least two of an enzyme replacement therapy, gene therapy and small molecule therapy.

ACTIVITY - Nephrotropic.

MECHANISM OF ACTION - Gene Therapy; Enzyme replacement therapy; Small molecule therapy.

Fabry mice were used to test the in vivo efficacy of combining enzyme replacement therapy (ET) with small molecule therapy (SMT) in a sequential treatment format. The study called for a single infusion of alpha -galactosidase A enzyme to reduce globotriaosyl-ceramide (GB3) levels to a baseline level in Fabry mouse liver. GB3 re-accumulation was then measured at four weeks in control mice receiving no SMT and in mice receiving various small molecules (vehicle) at various doses. Two weeks after GB3 levels were reduced to baseline level of 0.1 micro g/g liver, a small molecule was administered by intraperitoneal injection. In the vehicle treated control mice, GB3 re-accumulated to 0.8 micro g/g liver tissue at the four week time point. By contrast, D-threo-1-(3', 4' ethylenedioxy)phenyl-2-palmitoylamino-3-pyrrolidine-1-propanol (5 mg/kg) reduced GB3re-accumulation to less than 0.4 micro g/g liver tissue at 4 week time point. Similarly N-(5-adamantane-1-yl-methoxy)pentyl)deoxynojirimycin (100 mg/kg) reduced GB3 re-accumulation to less than 0.3 micro g/g liver tissue at 4 week time point.

USE - For treating Fabry disease (claimed) and lysosomal storage disease (LSDS) e.g. Gaucher, Niemann-Pick, Farber, GMI-gangliosidosis, GM2-gangliosidosis (Sandhoff), Tay-Sachs, Krabbe,

Page 65

Hurler-Scheie (MPS I), Hunter (MPS II), Sanfilippo (MPS III) Type A, Sanfilippo (MPS III) Type B, Sanfilippo (MPS III) Type C, Sanfilippo (MPS III) Type D, Marquio (MPS IV) Type A, Marquio (MPS IV) Type B, Maroteaux-Lamy (MPS VI), Sly (MPS VII), mucosulfatidosis, sialidoses, mucolipidosis II, mucolipidosis III, mucolipidosis IV, Fabry, Schindler, Pompe, sialic acid storage disease, fucosidosis, mannosidosis, aspartylglucosaminuria, Wolman, and neuronal ceroid lipofucsinoses.

ADVANTAGE - In Fabry if gene therapy does not reach the kidney wall enough for a clinical outcome, enzyme replacement therapy can be selectively targeted to the kidney. Other organs or disease loci such as bones and lung alveolar macrophages may not be well targeted by gene therapy, using enzyme replacement therapy however bones can be injected and lungs can be targeted with aerosols. Small molecule therapy is able to cross the blood-brain barrier (BBB) providing a powerful approach, when combined with gene and/or enzyme replacement therapy, for treating the disease having CNS manifestations. Substrate deprivation by small molecule therapy combined with enzyme replacement and/or gene therapy address the storage problem at separate and distinct intervention points which enhances clinical outcome. Gene therapy provides alpha -galactosudase A. The combination therapy produces a diminution in globotriaosylceramide. Dwg.0/2

FILE SEGMENT: CPI FIELD AVAILABILITY: AB; DCN

MANUAL CODES: CPI: B02-J; B04-B03C; B04-E01; B04-L01; B06-A02; B07-D03;

B14-L06; B14-S03A; D05-C03; D05-H12A

=> fil reg FILE 'REGISTRY' ENTERED AT 13:41:29 ON 15 OCT 2002 USE IS SUBJECT TO THE TERMS OF YOUR STN CUSTOMER AGREEMENT. PLEASE SEE "HELP USAGETERMS" FOR DETAILS. COPYRIGHT (C) 2002 American Chemical Society (ACS)

Property values tagged with IC are from the ZIC/VINITI data file provided by InfoChem.

STRUCTURE FILE UPDATES: 14 OCT 2002 HIGHEST RN 461382-59-2 DICTIONARY FILE UPDATES: 14 OCT 2002 HIGHEST RN 461382-59-2

TSCA INFORMATION NOW CURRENT THROUGH MAY 20, 2002

Please note that search-term pricing does apply when conducting SmartSELECT searches.

Crossover limits have been increased. See HELP CROSSOVER for details.

Experimental and calculated property data are now available. See HELP PROPERTIES for more information. See STNote 27, Searching Properties in the CAS Registry File, for complete details: http://www.cas.org/ONLINE/STN/STNOTES/stnotes27.pdf

=> s 72599-27-0

L100 1 72599-27-0 (72599-27-0/RN)

=> d ide

L100 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2002 ACS
RN 72599-27-0 REGISTRY
CN 3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, (2R,3R,4R,5S)- (9CI)
(CA INDEX NAME)
OTHER CA INDEX NAMES:

```
CN
      3,4,5-Piperidinetriol, 1-butyl-2-(hydroxymethyl)-, [2R-
      (2.alpha., 3.beta., 4.alpha., 5.beta.)]-
OTHER NAMES:
CN
     Miglustat
CN
      N-Butyl-1-deoxynojirimycin
CN
      N-Butyldeoxynojirimycin
      N-Butylmoranoline
CN
CN
     NB-DNJ
CN
     OGT 918
CN
      SC 48334
FS
      STEREOSEARCH
DR
     134282-77-2
MF
     C10 H21 N O4
CI
     COM
LC
     STN Files:
                     ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, BEILSTEIN*,
        BIOBUSINESS, BIOSIS, BIOTECHNO, CA, CANCERLIT, CAPLUS, CASREACT, CHEMCATS, CIN, CSCHEM, DRUGNL, DRUGUPDATES, EMBASE, IPA, MEDLINE,
        NAPRALERT, PHAR, PROMT, RTECS*, TOXCENTER, USPATFULL
           (*File contains numerically searchable property data)
```

Absolute stereochemistry.

\*\*PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT\*\*

111 REFERENCES IN FILE CA (1962 TO DATE)
4 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
111 REFERENCES IN FILE CAPLUS (1962 TO DATE)

=> fil capl; d que 141; d que 147; s (141 or 147) not 136 FILE 'CAPLUS' ENTERED AT 13:42:02 ON 15 OCT 2002 USE IS SUBJECT TO THE TERMS OF YOUR STN CUSTOMER AGREEMENT. PLEASE SEE "HELP USAGETERMS" FOR DETAILS.

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FILE COVERS 1907 - 15 Oct 2002 VOL 137 ISS 16 FILE LAST UPDATED: 14 Oct 2002 (20021014/ED)

This file contains CAS Registry Numbers for easy and accurate substance identification.

CAS roles have been modified effective December 16, 2001. Please check your SDI profiles to see if they need to be revised. For information on CAS roles, enter HELP ROLES at an arrow prompt or use the CAS Roles thesaurus (/RL field) in this file.

NODE ATTRIBUTES:
CONNECT IS E1 RC AT 12
DEFAULT MLEVEL IS ATOM
DEFAULT ECLEVEL IS LIMITED

GRAPH ATTRIBUTES: RING(S) ARE ISOLATED OR EMBEDDED NUMBER OF NODES IS 12

STEREO ATTRIBUTES: NONE

		· · · · · · · · · · · · · · · · · · ·
L9	152	SEA FILE=REGISTRY SSS FUL L7
L10	1	SEA FILE=REGISTRY ABB=ON GLUCOCEREBROSIDASE/CN
L28	224	SEA FILE=CAPLUS ABB=ON L9
L29	698	SEA FILE=CAPLUS ABB=ON L10
L35	899	SEA FILE=CAPLUS ABB=ON GAUCHER?/OBI
L37	137	SEA FILE=CAPLUS ABB=ON L29(L) (THU OR BAC OR PAC OR DMA OR
		PKT)/RL
L40	6	SEA FILE=CAPLUS ABB=ON L28 AND L29 AND L35
L41	2	SEA FILE=CAPLUS ABB=ON L37 AND L40

```
L10
              1 SEA FILE=REGISTRY ABB=ON GLUCOCEREBROSIDASE/CN
L29
            698 SEA FILE=CAPLUS ABB=ON L10
L35
            899 SEA FILE=CAPLUS ABB=ON
                                       GAUCHER?/OBI
            797 SEA FILE=CAPLUS ABB=ON
                                       GAUCHER DISEASE+OLD/CT
L44
             98 SEA FILE=CAPLUS ABB=ON
                                       L29(L)THU/RL
L45
            29 SEA FILE=CAPLUS ABB=ON
                                       L45(L)L35 AND L44
L46
L47
             4 SEA FILE=CAPLUS ABB=ON L46 AND REVIEW/DT
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L101

5 (L41 OR L47) NOT (36) previous printed

=> fil medl; d que 156

FILE 'MEDLINE' ENTERED AT 13:42:32 ON 15 OCT 2002

FILE LAST UPDATED: 12 OCT 2002 (20021012/UP). FILE COVERS 1958 TO DATE.

On June 9, 2002, MEDLINE was reloaded. See HELP RLOAD for details.

MEDLINE thesauri in the /CN, /CT, and /MN fields incorporate the MeSH 2002 vocabulary. Enter HELP THESAURUS for details.

THIS FILE CONTAINS CAS REGISTRY NUMBERS FOR EASY AND ACCURATE SUBSTANCE IDENTIFICATION.

L18	856	SEA	FILE=MEDLINE ABB=ON	GLUCOSYLCERAMIDASE/CT	ר			
L26	264	SEA	FILE=MEDLINE ABB=ON	L18(L)(TU OR PD OR PF	( OR AD)/CT			
L49	2280	SEA	FILE=MEDLINE ABB=ON	GAUCHER DISEASE/CT	Supplied ings The - Therapeutic use PD - pharmacology PK - pharmacology AD - administration & dosage TH - Therapy			
L52	170	SEA	FILE=MEDLINE ABB=ON	L26/MAJ	Shell restrict the			
L53	548	SEA	FILE=MEDLINE ABB=ON	L49(L)TH./CT	TH - Therapeut & use			
L54	301	SEA	FILE=MEDLINE ABB=ON	L53/MAJ	PD - pharmacology			
L55	144	SEA	FILE=MEDLINE ABB=ON	L52 AND L54	Ot - Manmorakinetias			
L56	12	SEA	FILE=MEDLINE ABB=ON	L55 AND REVIEW/DT	12 1 12 Edonal			
					AD- administration o dos			
					TH- Therapy			
=> s 15	=> s 156 not 150							

12 L56 NOT (L50) previously L102

=> fil embase; d que 185

FILE 'EMBASE' ENTERED AT 13:42:48 ON 15 OCT 2002 COPYRIGHT (C) 2002 Elsevier Science B.V. All rights reserved.

FILE COVERS 1974 TO 10 Oct 2002 (20021010/ED)

EMBASE has been reloaded. Enter HELP RLOAD for details.

This file contains CAS Registry Numbers for easy and accurate substance identification.

L60	770 SE	A FILE=EMBASE ABB=ON	GLUCOSYLCERAMIDASE/CT GAUCHER DISEASE/CT L61 (L) DT/CT L60 (L) (DT OR PK OR AD OR DO OR PD)/CT ENZYME REPLACEMENT/CT ENZYME THERAPY/CT  Subheadeny properties Fundament properties The drug properties FD - do Sage FD - phermacology
L61	1923 SE	A FILE=EMBASE ABB=ON	GAUCHER DISEASE/CT Justin days the anacolar stration
L65	349 SE	A FILE=EMBASE ABB=ON	L61 (L) DT/CT Dr pk - production AD - admiring
L76	108 SE	A FILE=EMBASE ABB=ON	L60(L) (DT OR PK OR AD OR DO OR PD)/CT
L78	689 SE	A FILE=EMBASE ABB=ON	ENZYME REPLACEMENT/CT
L84	501 SE	A FILE=EMBASE ABB=ON	ENZYME THERAPY/CT PD-Pulled 19
L85		A FILE=EMBASE ABB=ON	L65/MAJ AND L76/MAJ AND (L78 OR L84)
	AN	D GENERAL REVIEW/DT	

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9 L85 NOT (L71 OR L66)
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=> fil wpids; d que 197; s 197 not 190 FILE 'WPIDS' ENTERED AT 13:43:13 ON 15 OCT 2002 COPYRIGHT (C) 2002 THOMSON DERWENT

FILE LAST UPDATED: 10 OCT 2002 <20021010/UP> MOST RECENT DERWENT UPDATE: 200265 <200265/DW> DERWENT WORLD PATENTS INDEX SUBSCRIBER FILE, COVERS 1963 TO DATE

>>> The BATCH option for structure searches has been enabled in WPINDEX/WPIDS and WPIX >>>

- >>> PATENT IMAGES AVAILABLE FOR PRINT AND DISPLAY >>>
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http://www.stn-international.de/training center/patents/stn guide.pdf <<<

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L87	266 SEA FILE=WPIDS ABB=ON GAUCHER?
L91	94 SEA FILE=WPIDS ABB=ON GLUCOCEREBROSIDASE# OR GLUCOSYLCERAMIDAS
	E# OR GLUCOSYL CERAMIDASE# OR CERAMIDE GLUCOSIDASE#
L92	2 SEA FILE=WPIDS ABB=ON GLUCOSE CEREBROSIDASE# OR GLUCOSYLCEREBR
	OSIDASE# OR GLUCOXYL CEREBROSIDASE#
L96	5 SEA FILE=WPIDS ABB=ON (L91 OR L92)(5A)(ADMINIST? OR THERAP?
	OR REPLAC? OR EXOGENOUS?)
L97	4 SEA FILE=WPIDS ABB=ON L87 AND L96

4 L97 NOT (L90) previously L104

=> dup rem 1102,1101,1103,1104 FILE 'MEDLINE' ENTERED AT 13:43:27 ON 15 OCT 2002

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ANSWERS '17-24' FROM FILE EMBASE ANSWERS '25-28' FROM FILE WPIDS

10/031767 Page 70 Cook

=> d ibib ab hitrn 1-28; fil hom

L105 ANSWER 1 OF 28 MEDLINE DUPLICATE 1

95057004 ACCESSION NUMBER: MEDLINE

95057004 PubMed ID: 7967500 DOCUMENT NUMBER:

TITLE: Modifying exogenous glucocerebrosidase for effective

replacement therapy in Gaucher disease. Brady R O; Murray G J; Barton N W

AUTHOR:

CORPORATE SOURCE: Developmental and Metabolic Neurology Branch, National

Institute of Neurological Disorders and Stroke, Bethesda,

MD 20892.

JOURNAL OF INHERITED METABOLIC DISEASE, (1994) 17 (4) SOURCE:

510-9. Ref: 28

Journal code: 7910918. ISSN: 0141-8955.

PUB. COUNTRY: Netherlands

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199412

ENTRY DATE: Entered STN: 19950110

> Last Updated on STN: 20000303 Entered Medline: 19941228

Important therapeutic principles were established in developing effective AR enzyme replacement therapy for patients with Gaucher disease. The background and sequence of the investigations that led to effective delivery of exogenous glucocerebrosidase to the lipid-storing macrophages in patients with Gaucher disease are described. The principle of targeting the intravenously injected enzyme to the mannose lectin on the surface of these cells by engineering the glycoform of the enzyme is a useful model of an essential requirement for effective enzyme therapy. Similar strategies are expected to be effective for the treatment of a number of hereditary metabolic disorders of humans.

L105 ANSWER 2 OF 28 MEDITNE DUPLICATE 2

ACCESSION NUMBER: 92362554 MEDI.INE

DOCUMENT NUMBER: 92362554 PubMed ID: 1379912

TITLE: Alglucerase. A review of its therapeutic use in Gaucher's

disease.

AUTHOR: Whittington R; Goa K L

CORPORATE SOURCE: Adis International Limited, Auckland, New Zealand.

SOURCE: DRUGS, (1992 Jul) 44 (1) 72-93. Ref: 84 Journal code: 7600076. ISSN: 0012-6667.

PUB. COUNTRY: New Zealand

Journal; Article; (JOURNAL ARTICLE) DOCUMENT TYPE:

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199209

ENTRY DATE: Entered STN: 19920925

> Last Updated on STN: 20000303 Entered Medline: 19920917

AB Alglucerase is a mannose-terminated form of human placental glucocerebrosidase, developed to treat patients with Gaucher's disease. Functional glucocerebrosidase is deficient in Gaucher's disease, an autosomal recessive lipid storage disorder that affects people of all ethnic backgrounds, but has a higher incidence among East European Jews (Ashkenazim). Gaucher's disease manifests with hepatosplenomegaly, bleeding disorders and bone disease, with the more rare subtypes (types 2 and 3) featuring neurological dysfunction. Prior to the development of

enzyme replacement therapy, treatment for Gaucher's disease was mainly symptomatic relief. Primary treatment with glucocerebrosidase focuses on removal of the lipid metabolite that causes the pathology. Because of the rarity of Gaucher's disease clinical trials are small, and much of the data investigating alglucerase therapy have been obtained from studies of patients with type 1 disease, the prevalent subtype. Nonetheless, after intravenous administration of alglucerase, improvements are evident within 6 months of therapy. Patients have increased haemoglobin levels and platelet counts, and decreased incidences of epistaxis and bruising. Spleen and liver size are reduced, and skeletal parameters improve. Children gain height and most patients receiving alglucerase therapy are able to resume work and daily activities. Alglucerase is well tolerated, with few mild adverse reactions reported. Although the pharmacokinetic and pharmacodynamic information for alglucerase is limited, its unequivocal efficacy justifies enzyme replacement therapy with this compound as first-line treatment for patients with Gaucher's disease, for whom treatment options are limited.

L105 ANSWER 3 OF 28 MEDLINE

ACCESSION NUMBER: 2002030551 MEDLINE

DOCUMENT NUMBER: 21594229 PubMed ID: 11758685

TITLE: Clinically relevant therapeutic endpoints in type I Gaucher

disease.

AUTHOR: Hollak C E; Maas M; Aerts J M

CORPORATE SOURCE: Department of Hematology, Academic Medical Center,

Amsterdam, The Netherlands.. c.e.hollak@amc.uva.nl

SOURCE: JOURNAL OF INHERITED METABOLIC DISEASE, (2001) 24 Suppl 2

97-105; discussion 87-8. Ref: 32

Journal code: 7910918. ISSN: 0141-8955.

PUB. COUNTRY: Netherlands

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200204

ENTRY DATE: Entered STN: 20020124

Last Updated on STN: 20020425 Entered Medline: 20020424

AB The introduction of enzyme supplementation therapy for Gaucher disease has had a great impact on the lives of many patients. Organomegaly, cytopenia and bone disease have been shown to improve in response to treatment, resulting in an improvement in quality of life. However, the assessment of organ system involvement is not always done in such a way that the relationship with clinically relevant endpoints is clear. The lack of adequately validated methods of assessment, especially for bone disease, has hindered the establishment of treatment goals and guidelines for treatment optimization.

L105 ANSWER 4 OF 28 MEDLINE

ACCESSION NUMBER: 2002030550 MEDLINE

DOCUMENT NUMBER: 21594228 PubMed ID: 11758684

TITLE: Lessons learned from the development of enzyme therapy for

Gaucher disease.

AUTHOR: Barranger J A; O'Rourke E

CORPORATE SOURCE: Department of Human Genetics, University of Pittsburgh,

Pennsylvania 15261, USA.. jbarrang@helix.hgen.pitt.edu JOURNAL OF INHERITED METABOLIC DISEASE, (2001) 24 Suppl 2

SOURCE: JOURNAL OF INHERITED METABOLIC D 89-96; discussion 87-8. Ref: 89

Journal code: 7910918. ISSN: 0141-8955.

PUB. COUNTRY: Netherlands

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200204

ENTRY DATE: Entered STN: 20020124

Last Updated on STN: 20020425

Entered Medline: 20020424

Enzyme replacement therapy for the lysosomal storage disorders derives its AΒ impetus from the successes achieved in the treatment of Gaucher disease. After nearly two decades of persistent but unsuccessful efforts, the promise of therapy through enzyme replacement was losing credibility. Then, the fortunate intersection of two different lines of scientific research produced the necessary breakthrough. The dramatic responses to enzyme replacement therapy in patients with Gaucher disease made it immediately clear that this treatment approach was a success. Furthermore, the large number of patients with the disorder guaranteed commercial involvement. The lessons learned from the development of enzyme replacement therapy for Gaucher disease are broadly applicable to other lysosomal storage diseases and will be reviewed in this paper.

L105 ANSWER 5 OF 28 MEDLINE

ACCESSION NUMBER: 1998320985 MEDLINE

DOCUMENT NUMBER: 98320985 PubMed ID: 9656829

TITLE: [Enzyme substitution in Gauscher disease].

Enzymsubstitution ved mb. Gaucher. AUTHOR: Steensberg J; Nielsen K G; Brandt N J

CORPORATE SOURCE: H:S Rigshospitalet, Juliane Marie Centret, afsnit for

klinisk genetik 4062.

SOURCE: UGESKRIFT FOR LAEGER, (1998 Jun 22) 160 (26) 3900-3. Ref:

Journal code: 0141730. ISSN: 0041-5782.

PUB. COUNTRY: Denmark

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE:

Danish

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

199807

ENTRY DATE:

Entered STN: 19980811

Last Updated on STN: 20000303 Entered Medline: 19980728

AΒ Gaucher's disease is the most frequent inherited lysosomal storage disorder, displaying hepato-splenomegaly, thrombocytopenia, anaemia, and bone pain as characteristic features. Substitution with the modified enzyme alglucerase has revolutionized the treatment and prognosis of Gaucher's disease. Treatment in general and current trends in enzyme substitution therapy in particular are discussed.

L105 ANSWER 6 OF 28 MEDLINE

ACCESSION NUMBER: 1998326446 MEDLINE

DOCUMENT NUMBER: 98326446 PubMed ID: 9661800

TITLE: Enzyme therapy for Gaucher disease: the first 5 years.

AUTHOR: Grabowski G A; Leslie N; Wenstrup R

CORPORATE SOURCE: Division in Human Genetics, Children's Hospital Research

Foundation, Cincinnati, OH 45229-3039, USA...

grabg0@chmcc.org

CONTRACT NUMBER: DK 36729 (NIDDK)

NS 34071 (NINDS) NS 36681 (NINDS)

SOURCE: BLOOD REVIEWS, (1998 Jun) 12 (2) 115-33. Ref: 100

Journal code: 8708558. ISSN: 0268-960X.

PUB. COUNTRY: SCOTLAND: United Kingdom DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, ACADEMIC)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199810

ENTRY DATE: Entered STN: 19981020

Last Updated on STN: 20000303

Entered Medline: 19981007

Gaucher disease was first described by Philippe Gaucher in his 1882 AB medical thesis. Gaucher's original concept was of an unusual epithelioma of the spleen. By the early 1900s, Mandelbaum recognized the systemic nature of the disease. Several children with Gaucher disease were described at the turn of the century, but Rusca described a rapidly progressive fatal neurodegenerative type of disease, i.e. type 2, in the 1920s. The 'juvenile' form (type 3) of the disease was described in Sweden in the 1950s. In 1965, the deficient enzyme, acid beta-glucosidase, was discovered and the lysosomal nature of the disease was elucidated. Currently, three variants of Gaucher disease have been defined clinically and are distinguished by the presence and severity of neuronopathic involvement (Table 1). Each of these clinical types has substantial phenotypic variation, but types 1 and 3 have significantly heterogeneous rates of disease progression and degrees of visceral organs involvement. The neuronopathic involvement in type 3 also has substantial variation in the age of onset and disease progression even within relatively isolated communities. An extensive review of the clinical and pathologic involvement by Gaucher disease is available.

L105 ANSWER 7 OF 28 MEDLINE

ACCESSION NUMBER: 1998442152 MEDLINE

DOCUMENT NUMBER:

98442152 PubMed ID: 9770016

TITLE:

[Gaucher's disease and enzyme replacement therapy]. Maladie de Gaucher et traitement par enzymotherapie

substitutive.

AUTHOR:

R: Cornu F

CORPORATE SOURCE:

Genzyme SA, Cergy-Pontoise.

SOURCE:

ANNALES PHARMACEUTIQUES FRANCAISES, (1998) 56 (3) 102-7.

Ref: 17

Journal code: 2985176R. ISSN: 0003-4509.

PUB. COUNTRY:

France

DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE:

French

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

199811

ENTRY DATE:

Entered STN: 19990106

Last Updated on STN: 20000303 Entered Medline: 19981105

AB Gaucher disease is an autosomal recessive genetic disorder characterized by a deficiency in the glucocerebrosidase enzyme. Glucocerebroside then accumulates in macrophages (Gaucher cells), causing anemia, thrombocytopenia, organomegaly and major bone problems. Discovery of the enzyme deficiency by Brady in 1964, and subsequent extraction and partial deglycosylation of the native enzyme led to a treatment. 1,600 people out of 5,000 possible worldwide patients benefit from this drug. The 70 French treated patients (out of an estimated 200) show remarkable improvement.

L105 ANSWER 8 OF 28 MEDLINE

ACCESSION NUMBER: 1998159297 MEDLINE

DOCUMENT NUMBER: 98159297 PubMed ID: 9497862

TITLE:

Enzyme replacement therapy for Gaucher's disease.

AUTHOR:

Beutler E

Cook 10/031767 Page 74

CORPORATE SOURCE: Department of Molecular and Experimental Medicine, Scripps

Research Institute, La Jolla, CA 92037, USA.

CONTRACT NUMBER: RR00833 (NCRR)

SOURCE: BAILLIERES CLINICAL HAEMATOLOGY, (1997 Dec) 10 (4) 751-63.

Ref: 43

Journal code: 8800474. ISSN: 0950-3536.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199803

ENTRY DATE: Entered STN: 19980326

> Last Updated on STN: 20000303 Entered Medline: 19980317

AΒ Modified placental human glucocerebrosidase (alglucerase) and recombinant glucocerebrosidase (imiglucerase) are effective means of treating Type 1 Gaucher's disease. Amelioration of hepatosplenomegaly and of haematological manifestations is usually apparent within 6 months. Bone disease responds more slowly but within several years improvement is evident in most patients. Analysis of a large body of data demonstrates that the rate of response of all manifestations of Gaucher's disease is independent of dose over the range of 30 to 260 U/kg body weight per month. Even the response to 15 U/kg per month appears to be equivalent under most circumstances; treatment failures are the same in patients treated with 15, 30 and 130 U/kg per month. Patients with severe manifestations respond more rapidly than those with mild disease, and this, too, is true at all but the 15 U/kg per month dosage level. All available data thus support the administration of no more than 15 to 30  $\rm U$ of alglucerase or imiglucerase per kg/month. Frequent dosing, i.e. three times weekly, appears to be the most effective means of administration.

L105 ANSWER 9 OF 28 MEDLINE

ACCESSION NUMBER: 96242832 MEDLINE

DOCUMENT NUMBER: 96242832 PubMed ID: 8684492

TITLE:

[The treatment of Gaucher's disease in The Netherlands

using enzyme substitution therapy].

Behandeling van de ziekte van Gaucher in Nederland met

enzymvervangingstherapie.

AUTHOR: Hollak C E; van Oers M H; Maaswinkel P; Aerts J M; Goudsmit

CORPORATE SOURCE: Universiteit van Amsterdam, Academisch Medisch Centrum,

Afd. Inwendige Geneeskunde en Hematologie.

SOURCE: NEDERLANDS TIJDSCHRIFT VOOR GENEESKUNDE, (1996 May 11) 140

(19) 1011-3. Ref: 17

Journal code: 0400770. ISSN: 0028-2162.

PUB. COUNTRY: Netherlands DOCUMENT TYPE: (CLINICAL TRIAL)

(CONTROLLED CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: Dutch

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199608

ENTRY DATE: Entered STN: 19960828

Last Updated on STN: 20000303 Entered Medline: 19960822

L105 ANSWER 10 OF 28 MEDLINE

ACCESSION NUMBER: 97014993 MEDLINE

DOCUMENT NUMBER: 97014993 PubMed ID: 8861826 TITLE: Alglucerase (Ceredase).
AUTHOR: Wiltink E H; Hollak C E

CORPORATE SOURCE: Department of Clinical Pharmacy, St. Antonius Hospital,

Koekoekslaan 1, Nieuwegein, The Netherlands.

SOURCE: PHARMACY WORLD AND SCIENCE, (1996 Jan) 18 (1) 16-9. Ref:

12

Journal code: 9307352. ISSN: 0928-1231.

PUB. COUNTRY: Netherlands

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199702

ENTRY DATE: Entered STN: 19970219

Last Updated on STN: 20000303 Entered Medline: 19970206

L105 ANSWER 11 OF 28 MEDLINE

ACCESSION NUMBER: 96047864 MEDLINE

DOCUMENT NUMBER: 96047864 PubMed ID: 10155294

TITLE: Alglucerase. A pharmacoeconomic appraisal of its use in the

treatment of Gaucher's disease.

COMMENT: Comment in: Pharmacoeconomics. 1995 Jul;8(1):82-3

AUTHOR: Whittington R; Goa K L

CORPORATE SOURCE: Adis International limited, Auckland, New Zealand. SOURCE: PHARMACOECONOMICS, (1995 Jan) 7 (1) 63-90. Ref: 100

Journal code: 9212404. ISSN: 1170-7690.

PUB. COUNTRY: New Zealand

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, ACADEMIC)

LANGUAGE: English

FILE SEGMENT: Health Technology

ENTRY MONTH: 199511

ENTRY DATE: Entered STN: 20010223

Last Updated on STN: 20010223 Entered Medline: 19951114

Alglucerase is a modified form of human placental glucocerebrosidase used AB as enzyme replacement therapy for patients with Gaucher's disease, in whom functional glucocerebrosidase is deficient. Alglucerase has provided a breakthrough in treatment for patients with this relatively rare disease. With alglucerase infusions typical disease manifestations are ameliorated or normalised: hepatosplenomegaly is reduced, haematological parameters improve, and patients experience an increased quality of life usually within 4 to 6 months of treatment. Parameters of bone disease also respond, but generally over a longer period of treatment. Alglucerase is well tolerated by children and adults, with few adverse effects reported. Seroconversion occurs in approximately 15% of patients on high-dose therapy, but does not appear to affect the efficacy of treatment. Several dosage regimens have been used to deliver alglucerase, and the comparative benefits of these remain controversial. High-dose regimens of 60 IU/kg bodyweight administered every 2 weeks are clearly effective; however, smaller dosages given more frequently are also effective and incur a greatly reduced acquisition cost. Patient responses are variable, and the dosage regimen should be tailored to individual needs. Dosage regimens may be considerably reduced for the maintenance phase of treatment, but clinical experience is as yet insufficient to establish the minimum dosages required in the long term. Acquisition cost of alglucerase is \$US3.70 per unit (1994 US dollars); thus, a dosage regimen of 60 IU/kg bodyweight administered every 2 weeks for a patient weighing 70kg costs \$US404,040 per year. The minimal costs per quality-adjusted life year saved (QALY) have been estimated for 3 dosage regimens over a 10-year

period. Cost per QALY was \$US147,000 for 60 IU/kg bodyweight administered every 2 weeks, \$US75,000 for 30 IU/kg every 2 weeks, and \$US49,000 for 2.3 IU/kg administered 3 times per week. These costs were calculated assuming immediate death with no treatment, which suggests that the actual costs per QALY for most patients with type 1 or 3 disease are likely to be much higher. Drug administration costs may become a significant part of the cost during maintenance therapy; in addition, possible cost savings due to increased patient productivity and reduced palliative treatments remain unresolved. Although some patients may obtain increased benefit from high-dosage regimens, the very high cost may preclude general use of these regimens. Healthcare resources consumed by alglucerase therapy represent a large opportunity cost for other therapeutic areas. (ABSTRACT TRUNCATED AT 400 WORDS)

L105 ANSWER 12 OF 28 MEDLINE

ACCESSION NUMBER: 93248920 MEDLINE

DOCUMENT NUMBER: 93248920 PubMed ID: 8097903

TIME.

TITLE: Gaucher disease: a heterogeneous clinical complex for which

effective enzyme replacement has come of age.

AUTHOR: Frenkel E P

CORPORATE SOURCE: Harold C. Simmons Comprehensive Cancer Center, University

of Texas Southwestern Medical Center, Dallas 75235-8852. AMERICAN JOURNAL OF THE MEDICAL SCIENCES, (1993 May) 305

(5) 331-44. Ref: 92

Journal code: 0370506. ISSN: 0002-9629.

PUB. COUNTRY: United States

DOCUMENT TYPE: Conference; Conference Article; (CONGRESSES)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: English

SOURCE:

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH: 199306

ENTRY DATE: Entered STN: 19930618

Last Updated on STN: 20000303 Entered Medline: 19930602

AB Gaucher disease, the most common form of lysosomal storage disease, is the result of autosomal recessive inheritance of a lysosomal enzyme glucocerebrosidase deficiency, which produces defective hydrolysis of glucosylceramide that accumulates in reticuloendothelial (tissue macrophage) cells. The current review focuses on Type 1 (the nonneuronopathic) or adult Gaucher disease and defines the clinical manifestations (splenomegaly, hepatomegaly, bony lesions, and clinical metabolic dysfunction) in relationship to the known enzymatic defect. The clinical diversity and variability in symptoms and signs, the age at onset of the clinical manifestations and their rate of progression, and the heterogeneity of the organs involved are reviewed. Extensive delineation of the nature of the enzyme defect and the recent molecular characterization of the enzyme mutants has not provided an explantation for the remarkable clinical phenotypic heterogeneity. Enzyme assays now provide an excellent method for diagnosis. Effective enzyme replacement therapy emphasizes the value of early diagnosis and has altered the costs and potential risks of older therapeutic indications for splenectomy or cytokine therapy. Enzyme efficacy raises questions about the specific indications for replacement treatment and the most desirable rate and duration of enzyme delivery.

L105 ANSWER 13 OF 28 CAPLUS COPYRIGHT 2002 ACS ACCESSION NUMBER: 2001:208390 CAPLUS

DOCUMENT NUMBER:

134:248843

TITLE:

Use of GlcNAc-phosphotransferase and phosphodiester

.alpha.-GlcNAcase in production of highly phosphorylated lysosomal hydrolases useful in

treatment of lysosomal storage diseases

INVENTOR(S):

Canfield, William M.

PATENT ASSIGNEE(S):

USA

PCT Int. Appl., 91 pp. SOURCE:

CODEN: PIXXD2

DOCUMENT TYPE:

Patent

LANGUAGE:

English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PA <sup>s</sup>	PATENT NO.		KI	ND	DATE			Al	PPLI	CATIO	ON NO	o. 	DATE				
	2001 2001					20010			W	200	00-U	5219 <sup>°</sup>	70	20000	914		
	W:	AE, CR,	AG, CU,	AL, CZ,	AM, DE,	AT, DK,	DM,	DZ,	EE,	ES,	FI,	GB,	GD,	GE,	GH,	GM,	HR,
		LU,	LV,	MA,	MD,	IS, MG,	MK,	MN,	MW,	MX,	ΜZ,	NO,	ΝZ,	PL,	PT,	RO,	RU,
		ZA,	ZW,	AM,	AZ,	SK, BY,	KG,	ΚZ,	MD,	RU,	ТJ,	MT					
	RW:	DE,	DK,	ES,	FI,	MW, FR,	GB,	GR,	ΙE,	ΙT,	LU,	MC,	ΝL,	PT,	BE, SE,	CH, BF,	CY, BJ,
AU	2000	CF, 0733	CG, 03	CI,	CM, 5	GA, 2001	GN, 0417	GW,	ML,	MR, U 20	NE, 00-7	SN, 3303	TD,	TG 2000	0914		
BR	2000 1224	0145 266	14	A A	2	2002 2002	0723 0724		B: E	R 20 P 20	00-1 00-9	4514 6133	5	2000	0914 0914		
		IE.	SI,	LT,	LV,	DK, FI,	RO,	MK,	CY,	$\mathtt{AL}$						MC,	PT,
US PRIORIT	2002 Y APP				1	2002	0228		US 1	999-	1538	31P	P	1999	0914		
									US 2 WO 2					2000			

The lysosomal targeting pathway enzymes GlcNAc-phosphotransferase and AΒ phosphodiester .alpha.-GlcNAcase and uses in prodn. of highly phosphorylated lysosomal hydrolases that can be used to treat lysosomal storage diseases, are disclosed. Generally, the nucleic acid mols. coding for the enzymes are incorporated into expression vectors that are used to transfect host cells that express the enzymes. The expressed enzymes are recovered using monoclonal antibodies capable of selectively binding to bovine GlcNAc-phosphotransferase and to bovine phosphodiester .alpha.-GlcNAcase. Lysosomal hydrolases having high mannose structures are treated with GlcNAc-phosphotransferase and phosphodiester .alpha.-GlcNAcase resulting in the prodn. of asparagine-linked oligosaccharides that are highly modified with mannose 6-phosphate ("M6P"). The treated hydrolase binds to M6P receptors on the cell membrane and is transported into the cell and delivered to the lysosome where it can perform its normal or a desired function. The highly phosphorylated lysosomal hydrolases are readily taken into the cell and into the lysosome during enzyme replacement therapy procedures.

37228-64-1, Glucocerebroside .beta.-Glucosidase IT RL: BPR (Biological process); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)

(use of GlcNAc-phosphotransferase and phosphodiester .alpha.-GlcNAcase in prodn. of highly phosphorylated lysosomal hydrolases useful in treatment of lysosomal storage diseases)

155501-85-2 IT

RL: BUU (Biological use, unclassified); BIOL (Biological study); USES

(use of GlcNAc-phosphotransferase and phosphodiester .alpha.-GlcNAcase in prodn. of highly phosphorylated lysosomal hydrolases useful in treatment of lysosomal storage diseases)

Page 78

ACCESSION NUMBER:

1997:795028 CAPLUS

DOCUMENT NUMBER:

128:97211

TITLE:

Gene therapy for Gaucher disease via genetically

engineered primary myoblasts

AUTHOR(S):

Liu, Chunming; Watkins, Simon; Bahnson, Alfred;

Barranger, John A.

CORPORATE SOURCE:

Germany

SOURCE:

Concepts in Gene Therapy (1997), 283-295. Editor(s):

Strauss, Michael; Barranger, John A. de Gruyter:

Berlin, Germany. CODEN: 65LFAB

DOCUMENT TYPE:

Conference; General Review

LANGUAGE:

English

AΒ A review with 40 refs.

TT

37228-64-1, Glucocerebrosidase

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses) (gene therapy for Gaucher disease via genetically engineered

primary myoblasts)

L105 ANSWER 15 OF 28 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER:

1998:60923 CAPLUS

DOCUMENT NUMBER:

128:188137

TITLE:

Macrophage-targeted glucocerebrosidase: a

therapeutically effective enzyme replacement product

for Gaucher disease

AUTHOR(S):

Barton, Norman W.; Brady, Roscoe O.

CORPORATE SOURCE:

Biotechnology General Corporation, Iselin, NJ, USA

SOURCE:

Drugs and the Pharmaceutical Sciences (1997),

84(Pharmaceutical Enzymes), 261-283 CODEN: DPHSDS; ISSN: 0360-2583

PUBLISHER:

Marcel Dekker, Inc.

DOCUMENT TYPE:

Journal; General Review

LANGUAGE:

English

A review, with 50 refs. Several important principles were established in the course of developing effective enzyme replacement therapy for Gaucher disease. Nascent investigations, carbohydrate modification of glucocerebrosidase, first demonstration of clin. responses to macrophage-targeted glucocerebrosidase, dose-response trial, clin. efficacy trial, how broad is the clin. effective dosage range, and addnl. projects and future investigations are discussed. It was anticipated that the lessons learned during these investigations will be applicable in the design of treatments for other heritable storage disorders.

37228-64-1, .beta.-Glucocerebrosidase

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(macrophage-targeted glucocerebrosidase as enzyme replacement product for Gaucher disease)

L105 ANSWER 16 OF 28 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER:

1997:437773 CAPLUS

DOCUMENT NUMBER: TITLE:

127:120028 Gaucher disease

AUTHOR(S):

Eto, Yoshikatsu

CORPORATE SOURCE:

Dep. Pediatrics, Tokyo Jikei Univ. Med. Sch., Japan

SOURCE:

Lipid (1997), 8(3), 235-240 CODEN: LIPDET; ISSN: 0915-6607

PUBLISHER:

Medikaru Rebyusha

DOCUMENT TYPE:

Journal; General Review

LANGUAGE:

Japanese AΒ A review, with 6 refs., discussing characteristics of gene mutations in Gaucher disease in human. A discussion of the transfer and sustained high expression of the human glucocerebrosidase gene in mice and their

functional macrophages following transplantation of the bone marrow transduced by a retroviral vector is also presented.

37228-64-1, Glucocerebrosidase

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(gene mutations and transfer in human Gaucher disease)

L105 ANSWER 17 OF 28 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

1998370386 EMBASE ACCESSION NUMBER:

[Low dose enzyme replacement therapy in paediatric type 1TITLE:

Gaucher's disease].

TERAPIA ENZIMATICA SOSTITUTIVA A BASSE DOSI NELLE FORME

PEDIATRICHE DI MALATTIA DI GAUCHER TIPO 1.

Bembi B.; Donda M.G.; Martini C.; Zanatta M.; Boscolo R.; AUTHOR:

Katouzian F.; Ciana G.

B. Bembi, Ctro. Diagn. e cura Malattia Gaucher, Malattie CORPORATE SOURCE:

Congenite del Metabolismo, Ist Ric. Cura Carat. Sci B. Garofolo, via dell'Istria 65/1, 34137 Trieste, Italy

Rivista Italiana di Pediatria, (1998) 24/1 (93-98). SOURCE:

Refs: 31

ISSN: 0392-5161 CODEN: RITODB

COUNTRY: Italy

Journal; General Review DOCUMENT TYPE: Endocrinology 003 FILE SEGMENT:

Pediatrics and Pediatric Surgery 007

037 Drug Literature Index

LANGUAGE: Italian

L105 ANSWER 18 OF 28 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

1998014554 EMBASE ACCESSION NUMBER:

TITLE:

A practical approach to diagnosis and management of

Gaucher's disease.

Mistry P.K.; Abrahamov A. AUTHOR:

P.K. Mistry, Hepato-biliary Liver Transplant Unit, Royal CORPORATE SOURCE:

Free Hospital, School of Medicine, Pond Street, London NW3

2QG, United Kingdom

Bailliere's Clinical Haematology, (1997) 10/4 (817-838). SOURCE:

Refs: 86

ISSN: 0950-3536 CODEN: BCHAEW

United Kingdom COUNTRY:

Journal; General Review DOCUMENT TYPE: FILE SEGMENT: 012 Ophthalmology

Clinical Biochemistry 029 037 Drug Literature Index

038 Adverse Reactions Titles

LANGUAGE: English SUMMARY LANGUAGE: English

The diagnosis of Gaucher's disease is established by demonstration of reduced acid .beta.-glucosidase activity in peripheral blood leukocytes. Genotyping at the glucocerebrosidase gene locus can give additional prognostic information and facilitate carrier detection. However, extreme phenotypic diversity precludes reliable prediction of prognosis in individual patients. Histological diagnosis of Gaucher's disease is unnecessary and can be misleading. A range of clinical, radiological and laboratory parameters are useful for staging disease activity which is central to achieving optimal timing to initiate enzyme therapy. Treatment should be individualized to obtain maximum therapeutic response. The recent introduction of chitotriosidase measurements has provided a valuable indicator of total cellular burden of storage cells. Serial measurements of chitotriosidase activity are useful for monitoring disease progression as well as response to therapy. A number of adjuvant therapies are available for use in conjunction with enzyme treatment. Special

Cook 10/031767

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considerations apply to management of affected children.

L105 ANSWER 19 OF 28 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 94213382 EMBASE

DOCUMENT NUMBER: 1994213382

TITLE: Enzyme replacement therapy for Gaucher disease: Critical

investigations beyond demonstration of clinical efficacy.

AUTHOR: Brady R.O.; Barton N.W.

CORPORATE SOURCE: Devtl./Metabolic Neurology Branch, NINDS, National

Institutes of Health, Bethesda, MD 20892, United States Biochemical Medicine and Metabolic Biology, (1994) 52/1

(1-9).

ISSN: 0885-4505 CODEN: BMMBES

COUNTRY: United States

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 007 Pediatrics and Pediatric Surgery

022 Human Genetics

029 Clinical Biochemistry

030 Pharmacology

037 Drug Literature Index

LANGUAGE: English SUMMARY LANGUAGE: English

SOURCE:

Enzyme replacement therapy is highly effective for patients with Type 1 Gaucher disease. In order to estimate the quantity of enzyme that would be necessary for clinical benefit, we conducted a single-infusion, dose-response study in nonsplenectomized patients with Gaucher disease. Biochemical and histologic changes were compared in liver biopsy specimens obtained before and 44 h following the infusion of varying quantities of enzyme. Based on the information obtained from this investigation, patients in our initial clinical efficacy trial were given 60 IU of macrophage-targeted glucocerebrosidase/kg body wt every other week. All patients had significant improvement of their anemia and reduction of splenomegaly after 6 months of treatment. In a subsequent investigation, 10 moderately symptomatic patients with intact spleens were given 10 IU of glucocerebrosidase/kg body wt every other week. After 6 months of treatment, only a portion of these patients had beneficial responses. We concluded that the rate and extent of response to enzyme replacement therapy in patients with Gaucher disease are dependent upon the quantity of enzyme administered. When treatment is initiated in patients with mild to moderately severe disease, a lower dose of enzyme can be selected. Moreover, the maintenance dose of glucocerebrosidase has been shown to be much less than the amount initially required to reduce the accumulated lipid. Some patients require enzyme infusions on only a monthly basis, and it is possible that even this frequency may eventually be reduced. These refinements in treatment strategy merit serious consideration for the long-term management of patients with Gaucher disease.

L105 ANSWER 20 OF 28 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 93159507 EMBASE

DOCUMENT NUMBER: 1993159507

TITLE: Clinical and therapeutic perspectives on Gaucher disease.

AUTHOR: Grabowski G.A.

CORPORATE SOURCE: Division of Human Genetics, Children's Hospital Medical

Center, Elland and Bethesda Avenues, Cincinnati, OH

45229-2899, United States

SOURCE: International Pediatrics, (1993) 8/1 (22-29).

ISSN: 0885-6265 CODEN: INPDEV

COUNTRY: United States

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 007 Pediatrics and Pediatric Surgery

029 Clinical Biochemistry

LANGUAGE: English SUMMARY LANGUAGE: English

AB Gaucher disease is the most frequent lysosomal storage disease. Strong genotype/phenotype correlations have been found between common mutations at the acid .beta.-glucosidase locus and the types and severity of Gaucher disease. Enzyme replacement therapy has demonstrated efficacy at several different dosages and provides for reversal of disease manifestations in even the most severely affected nonneuronopathic patients. The high frequency of this disease, the genotype/phenotype correlations and the availability of therapy makes Gaucher disease a prototype for developing broadened approaches to screening and intervention programs which will be applicable to other inborn errors of metabolism.

L105 ANSWER 21 OF 28 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 92349216 EMBASE

DOCUMENT NUMBER: 1992349216

TITLE: Creating the costliest orphan: The Orphan Drug Act in the

development of Ceredase (TM).

AUTHOR: Goldman D.P.; Clarke A.E.; Garber A.M.

CORPORATE SOURCE: National Economic Res. Bureau, Inc., 204 Junipero Serra

Boulevard, Stanford, CA 94305-8091, United States

SOURCE: International Journal of Technology Assessment in Health

Care, (1992) 8/4 (583-597). ISSN: 0266-4623 CODEN: IJTCEK

COUNTRY: United States

DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 006 Internal Medicine

036 Health Policy, Economics and Management

037 Drug Literature Index

LANGUAGE: English SUMMARY LANGUAGE: English

AB The FDA recently approved Ceredase(TM), a new treatment for Gaucher's disease, under the provisions of the Orphan Drug Act. Ceredase(TM) is unusually expensive, but there are no satisfactory alternative therapies. It appears likely that Ceredase(TM) would not have become available without the protection of the Orphan Drug Act, but its expense and the lack of information about its long-term effects on health raise questions about whether the ODA provides appropriate incentives to develop cost-effective technologies.

L105 ANSWER 22 OF 28 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 92213811 EMBASE

DOCUMENT NUMBER: 1992213811
TITLE: Pediatrics.
AUTHOR: Barness L.A.

CORPORATE SOURCE: University of Wisconsin, Madison, WI, United States

SOURCE: Journal of the American Medical Association, (1992) 268/3

(399-401).

ISSN: 0098-7484 CODEN: JAMAAP

COUNTRY: United States

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 007 Pediatrics and Pediatric Surgery

022 Human Genetics

037 Drug Literature Index

LANGUAGE: English

L105 ANSWER 23 OF 28 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 92213803 EMBASE

DOCUMENT NUMBER: 1992213803 TITLE: Neurology. AUTHOR: Joynt R.J.

CORPORATE SOURCE: University of Rochester, School of Medicine and

Dentistry, Rochester, NY, United States

SOURCE: Journal of the American Medical Association, (1992) 268/3

(380 - 382).

ISSN: 0098-7484 CODEN: JAMAAP

COUNTRY: United States

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 800 Neurology and Neurosurgery

> 037 Drug Literature Index Adverse Reactions Titles 038

LANGUAGE: English

L105 ANSWER 24 OF 28 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 91339810 EMBASE DOCUMENT NUMBER: 1991339810

Current concepts: Gaucher's disease. TITLE:

Beutler E. AUTHOR:

CORPORATE SOURCE: Dept. of Molecular/Exptl. Med., Scripps Research Institute,

10666 N. Torrey Pines Rd., La Jolla, CA 92037, United States New England Journal of Medicine, (1991) 325/19 (1354-1360).

SOURCE:

ISSN: 0028-4793 CODEN: NEJMAG

United States COUNTRY:

DOCUMENT TYPE: Journal; General Review Internal Medicine FILE SEGMENT: 006 022 Human Genetics

> 029 Clinical Biochemistry Drug Literature Index 037

LANGUAGE: English

L105 ANSWER 25 OF 28 WPIDS (C) 2002 THOMSON DERWENT

ACCESSION NUMBER: 2002-329381 [36] WPIDS

C2002-095089 DOC. NO. CPI:

Polymer based intracellular delivery system useful for TITLE:

delivery of polypeptides for antitumor, antiinflammatory

or immunosuppressive therapy, and for treatment of

genetic and Gaucher's disease.

A96 B04 D16 DERWENT CLASS:

LAVI, S; SATCHI-FAINARO, R INVENTOR(S):

(UYRA-N) UNIV RAMOT APPLIED RES & IND DEV LTD PATENT ASSIGNEE(S):

COUNTRY COUNT:

PATENT INFORMATION:

PATENT NO KIND DATE WEEK LA

WO 2002007671 A2 20020131 (200236)\* EN 73

RW: AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW MZ

NL OA PT SD SE SL SZ TR TZ UG ZW

W: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR

KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ PL PT RO RU

SD SE SG SI SK SL TJ TM TR TT TZ UA UG US UZ VN YU ZA ZW

AU 2001080035 A 20020205 (200236)

APPLICATION DETAILS:

PATENT NO KIND APPLICATION DATE \_\_\_\_\_ WO 2001-IL689 20010726 AU 2001-80035 20010726 WO 2002007671 A2 AU 2001080035 A

FILING DETAILS:

PATENT NO KIND PATENT NO AU 2001080035 A Based on WO 200207671

PRIORITY APPLN. INFO: US 2000-668713 20000922; US 2000-220971P

20000726

AB WO 200207671 A UPAB: 20020610

NOVELTY - A complex molecule (I), comprising a conjugate of a polymer capable of being taken up by a cell linked to a biologically active polypeptide, is new. The conjugate is capable of achieving intracellular delivery of the polypeptide while retaining its biological activity. The biologically active peptide is other than an antibody which binds to a cell surface marker or receptor.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for the following:

- (1) a pharmaceutical composition comprising (I) as an active ingredient; and
- (2) a method which comprises contacting an eukaryotic cell with a composition comprising a carrier and a polymer capable of being taken up by a cell, the polymer being linked to a polypeptide, which enters the cell and exhibits an enzymatic activity within the cell.

ACTIVITY - Immunosuppressive; Cytostatic; Antiinflammatory; Vasotropic.

Antitumor activity of hydroxypropyl methacrylamide (HPMA) copolymer-protein phosphatase 2C (PP2C) conjugate was evaluated. Male C57BL/6J mice were inoculated with 105 viable B16F10 melanoma cells subcutaneously. The tumor was allowed to establish until the area was 20-50 mm2 as measured by the product of two orthogonal diameters. Animals were injected intravenously by the tail vein in a single treatment with HPMA-PP2C conjugate (20 mg/kg polypeptide equivalent in saline). Additional groups of animals were treated with saline (100 micro 1intravenously) as control. Each group consisted of 6 mice. Animals were weighed and the tumor measured daily. Animals were monitored for general health, weight loss and tumor progression. There was no weight loss. Mice were culled when the tumor reached or surpassed the size of 300 mm2. At termination, the animals were examined and the tumors were dissected and weighed. The results showed that the growth of the tumor was much slower in the mice treated with the conjugate. The conjugate caused complete regression of the tumor, without the fear of immunogenicity.

MECHANISM OF ACTION - Delivers polypeptides into cells.

USE - (I) is useful for intracellular delivery of a polypeptide such as a therapeutic antibody, intrabody, toxin, enzyme ( glucocerebrosidase), anti-tumor polypeptide, antiinflammatory polypeptide or a polypeptide for immunosuppressive therapy used in transplantation procedure, and a polypeptide for treatment of genetic disease, autoimmune disease, or a polypeptide for preventing re-occlusion or restenosis. (I) is useful for treating a subject suffering from a disorder or a symptom in a subject, and in the preparation of a medicament for treating genetic disease or Gaucher's disease. (All claimed). (I) is useful for therapeutic and diagnostic purposes and delivers polypeptides for which the cells that are the target have no receptors. (I) is useful in delivery of polypeptide for therapy of any condition which requires intracellular delivery of polypeptide, and for elucidation of the activity of unknown proteins and polypeptides. (I) is useful for transplantation procedure, more preferably for corneal transplantation.

L105 ANSWER 26 OF 28 WPIDS (C) 2002 THOMSON DERWENT

ACCESSION NUMBER: 2001-529882 [58] WPIDS

CROSS REFERENCE: 2001-522553 [57]
DOC. NO. CPI: C2001-158064

TITLE: Treating a patient with a lysosomal storage disease comprises administering a bisphosphonate compound to induce apoptosis of macrophages.

DERWENT CLASS:

B04 D16

23

INVENTOR(S):

CHENG, S; GOLDBERG, M; MARSHALL, J; ZIEGLER, R

PATENT ASSIGNEE(S):

(CHEN-I) CHENG S; (GOLD-I) GOLDBERG M; (MARS-I) MARSHALL

J; (ZIEG-I) ZIEGLER R; (GENZ) GENZYME CORP

COUNTRY COUNT:

PATENT INFORMATION:

PATENT NO KIND DATE WEEK LA PG

WO 2001060377 A2 20010823 (200158)\* EN 2

RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE TR

W: AU CA JP

US 2001031741 A1 20011018 (200166)

AU 2001036713 A 20010827 (200176)

## APPLICATION DETAILS:

PA	TENT NO K	IND		API	PLICATION	DATE
	2001060377 2001031741		Provisional Provisional	US US	2001-US3875 2000-183296P 2001-260069P 2001-777743	20010206 20000217 20010105 20010206
AU	2001036713	Α			2001-36713	20010206

### FILING DETAILS:

PA'	TENT NO			PA'	TENT NO		
	20010317 20010367	41 A1		20		WO	200160414

PRIORITY APPLN. INFO: US 2001-260069P 20010105; US 2000-183296P 20000217; US 2001-777743 20010206

AB WO 200160377 A UPAB: 20011010

NOVELTY - Treating (M1) a patient suffering from an accumulation of a metabolite within macrophages comprising treating the patient with a macrophage depleting amount of bisphosphonate compound (I) to induce apoptosis of macrophages to release the metabolite into circulation so that it may be eliminated from the patient, is new.

ACTIVITY - Osteopathic; hepatotropic; nootropic; neuroprotective;

analgesic.

MECHANISM OF ACTION - Apoptosis-inducer; gene-therapy.

1 x 109 particles of adenovirus encoding alpha galactosidase A (AD2/CMVHI alpha gal) were injected into the tail vein of two groups of Fabry mice. One group had been pre-treated with clodronate liposomes. Organs were divided to be assayed alpha-galactosidase A expression and GL-3 levels. Tissues were assayed by ELISA. Clodronate liposome pre-treatment enhanced levels and persistence of expression from 1 X 109 particles of AD2/CMVHI alpha gal with resulting GL-3 clearance in all tissues except kidney. The dose of vector was not sufficient to clear GL-3 in Fabry mice treated with virus alone.

USE - The method is useful for treating a patient suffering from an accumulation of a metabolite within macrophages especially patients with lysosomal storage diseases such as Pompe disease, Hurler's disease, Niemann-pick disease, Fabry's disease and Gaucher's disease (all

claimed).

ADVANTAGE - The gene therapy treatment allows persistent expression of therapeutic levels of lysosomal storage enzymes produced from gene therapy vectors and at lower dosage regimens than conventional treatments. The treatment with (I) eliminates significant amounts of lysosomal storage products which are usually sequestered within macrophages. Dwg.0/6

L105 ANSWER 27 OF 28 WPIDS (C) 2002 THOMSON DERWENT

ACCESSION NUMBER: 1998-099801 [09] WPIDS

CROSS REFERENCE:

1994-217531 [26]; 1997-243960 [21]

DOC. NO. CPI:

C1998-032886

TITLE:

Treating Gaucher's disease by administering a glucocerebrosidase

conjugate - which includes recombinant glucocerebrosidase to which poly(alkylene oxide) strands are linked via a

urethane linkage.

DERWENT CLASS: INVENTOR(S):

A25 A96 B04 D16

CHO, M; GILBERT, C W; GINNS, E J; MARTIN, B M; SHORR, R G

PATENT ASSIGNEE(S):

(USSH) US DEPT HEALTH & HUMAN SERVICES

COUNTRY COUNT:

PATENT INFORMATION:

PATENT	NO	KIND	DATE	WEEK	LA	PG
					<b>-</b>	
US 5705	5153	A	19980106	(199809) *		5

## APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
US 5705153	A CIP of Div ex	US 1992-989802 US 1994-346680 US 1996-735961	19921210 19941130 19961023

### FILING DETAILS:

PATENT NO	KIND		PATENT NO
US 5705153	A D	v ex	115 5620884

PRIORITY APPLN. INFO: US 1994-346680 19941130; US 1992-989802 19921210; US 1996-735961 19961023

US 5705153 A UPAB: 19980302 AB

Treatment of Gaucher's disease comprises administration of a glucocerebrosidase (GC) conjugate which has enhanced enzymatic activity at pH ranges 4.0-5.0 and 6.5-7.5, and which comprises recombinant GC and 1-25 poly(alkylene oxide) strands, each of which has a molecular weight of 1,000-15,000 and is covalently linked, via a urethane linkage, to an amino group on the recombinant GC.

USE - Gaucher's disease is an autosomal recessive genetic disorder. It is the most common lysosomal storage disorder and is related to a defect in naturally occurring GC. There is currently no cure.

ADVANTAGE - The conjugates are resistant to in vivo hydrolysis, and thus require less frequent administration when compared to unmodified enzyme preparations. They exhibit prolonged activity against accumulated glycolipids.

Dwg.0/0

L105 ANSWER 28 OF 28 WPIDS (C) 2002 THOMSON DERWENT

ACCESSION NUMBER: 1993-274677 [35] WPIDS

DOC. NO. CPI:

C1993-122479

TITLE:

Detection of Gaucher's disease - by screening

DNA for a substitution of adenine for guanine at position

1 of gluco cerebrosidase gene intron 2.

DERWENT CLASS: INVENTOR(S):

B04 D16 BEUTLER, E

PATENT ASSIGNEE(S):

(SCRI) SCRIPPS RES INST

COUNTRY COUNT:

21

# PATENT INFORMATION:

PATENT NO	KIND DATE	WEEK	LA	PG		
EP 558257	A1 1993090	1 (199335)	 ) * EN	42	·	
R: AT BE	CH DE DK ES	FR GB GR	IE IT	LI LU	MC NL	PT SE
CA 2089351	A 1993082	5 (199346)	)			
US 5266459	A 1993113	0 (199349)	)	27		
JP 06098798	A 1994041	.2 (199419)	)	30		
JP 2502024	B2 1996052	9 (199626)	)	30		
KR 9510188	B1 1995091	.1 (199846)	)			

#### APPLICATION DETAILS:

CA 2089351 A CA 1993-2089351 19930211 US 5266459 A US 1992-841652 19920224 JP 06098798 A JP 1993-58076 19930224 JP 2502024 B2 JP 1993-58076 19930224	PATENT NO	KIND	APPLICATION	DATE
	CA 2089351 US 5266459 JP 06098798 JP 2502024	A A A B2	CA 1993-2089351 US 1992-841652 JP 1993-58076 JP 1993-58076	19930223 19930211 19920224 19930224 19930224 19930224

## FILING DETAILS:

PATENT NO	KIND		PAT	ENT	NO	
						_
JP 2502024	B2 Previou	s Publ.	JΡ	0609	8798	

PRIORITY APPLN. INFO: US 1992-841652 19920224

AB EP 558257 A UPAB: 19970502

Human genetic screening method comprises assaying a nucleic acid sample isolated from a human for the presence of a glucocerobrosidae (GC) gene point mutation characterised as a substn. of an adenine nucleotide for a guanine nucleotide at nucleotide postion 1 of GC gene intron 2.

The method may further comprise assaying for the presence of (i) a GC gene insertion mutation characterised as an insertion of a guanine nucleotide adjacent to nucleotide position 57 of GC gene exon 2, (ii) a GC gene point mutation characterised as a change from an adenine nucleotide to a guanine nucleotide at nucleotide position 2 of GC gene exon 9, or (iii) a GC gene point mutation characterised as a change from a thymine nucleotide to a cytosine nucleotide at nucleotide position 60 of GC gene exon 10.

USE - The methods are used for screening humans for GC alleles associated with **Gaucher'**s disease. They can be used to diagnose either the disease itself or a heterozygous carrier state. Dwg.0/0

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